

INTERNATIONAL RESCUE COMMITTEE

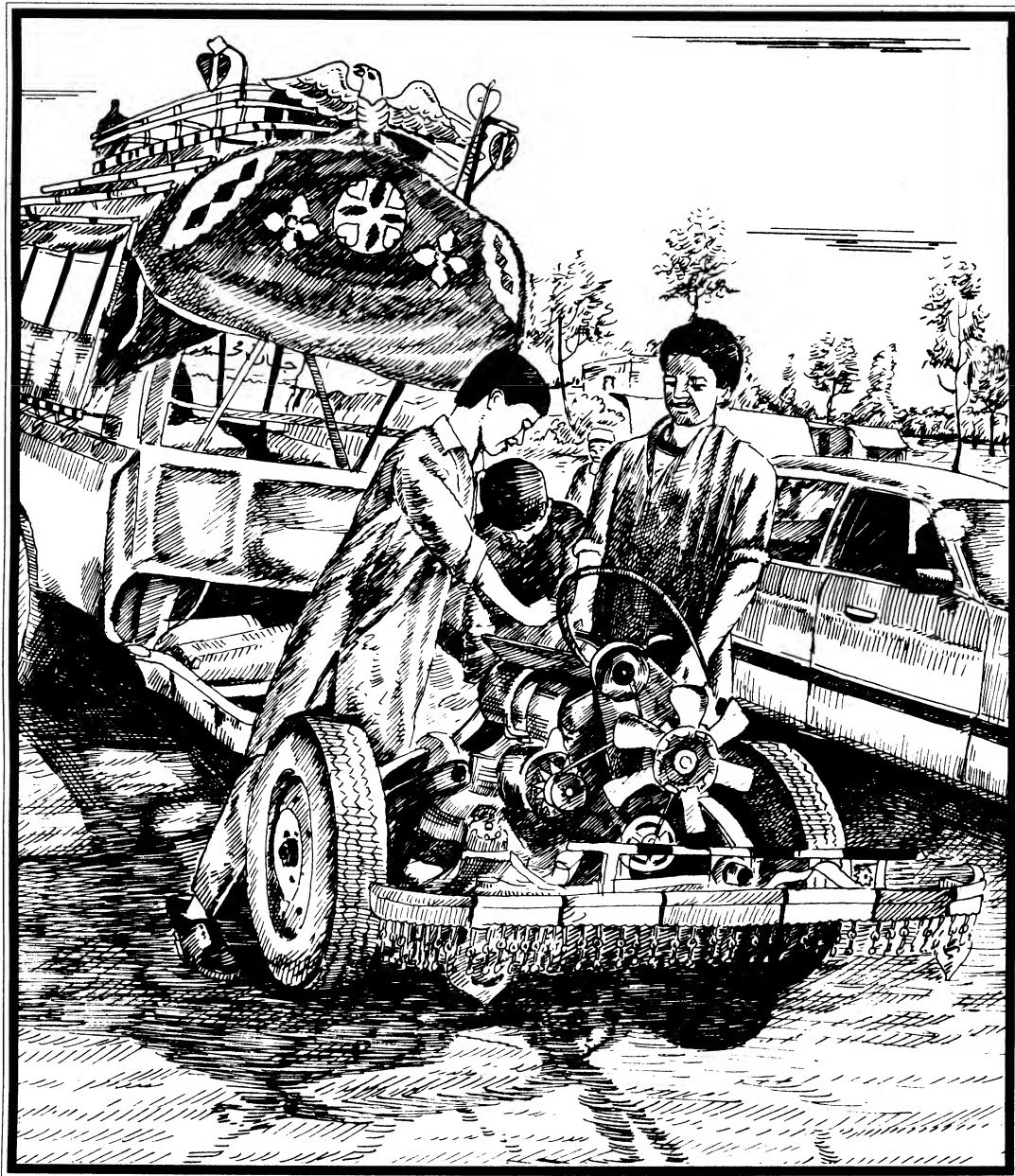
ANNUAL REPORT 1995



IRC - PROGRAM FOR AFGHANS



Refugees trained to help themselves...



SRP-trained mechanics at work on a Bedford bus



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FOREWORD



he war in Afghanistan began with the invasion by Soviet troops in December 1979, but the struggle for supremacy in the country has yet to end, with alliances coalescing, breaking and reforming, clouded by the recent rise of the *taliban*, who claim to be fighting to bring peace, honor and Islam to the battered country but whose bombs, rockets and mines are just as lethal for both civilians and military as those of the Soviet forces or mujahedin factions. At their peak, the struggles for ascendancy generated over three million refugees fleeing to the safety of Pakistan and over two million into Iran. The heart of the nation, Kabul, stands partially reduced to rubble, still the scene of a continuing siege while the population remaining has come to regard rocket attacks, bombardments, death and dismemberment as a natural part of their lives, testimony to the extraordinary endurance of its people.

Beyond the shattered capital, a large part of Afghanistan is presently at peace. In the eastern and northern provinces strong and consistent administrations have maintained public order while in the rest of the country, the relative peace achieved by the *taliban* is tempered by their repression of women, strict Sharia law, extreme socio-religious conservatism and erratic administration. An unstable peace, perhaps, but a peace nonetheless.

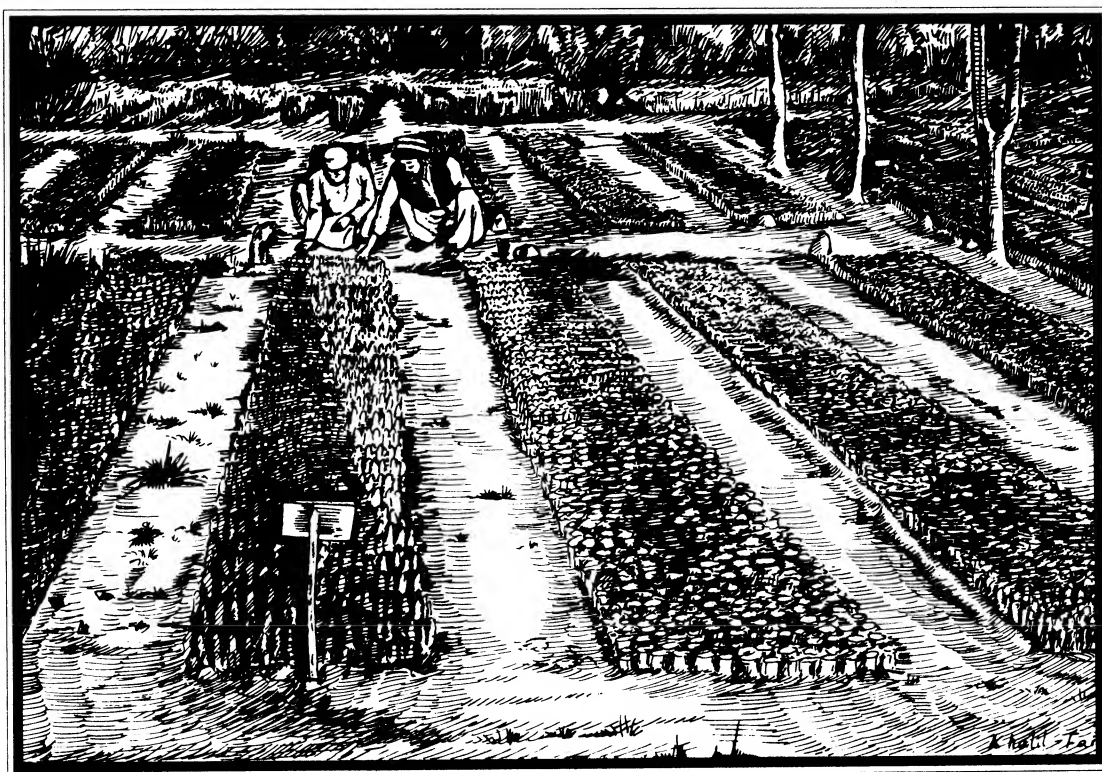
In an attempt to encourage refugee repatriation to areas of relative peace, IRC-Pakistan's Country Program has shifted its focus increasingly from assistance to the Afghan refugees exiled in Pakistan to rehabilitation of those provinces of Afghanistan which were home to most of the refugees whom IRC has served over the years. The reconstruction by aid agencies of the physical and social fabric in many parts of the country has produced an effect but the needs are great and the resources few. Many landed or urban refugees as well as those with income-generating opportunities have returned and continue to return to their homeland. Many have returned to Kabul, despite the death toll recorded almost daily in the capital.

IRC's Program for Afghan refugees, which has been steadily shrinking since 1992, has over time witnessed substantial changes among its beneficiary groups. Assistance to Afghan refugees has been steadily declining over the years, donors being increasingly unwilling to invest in a country so long and as yet still unable to resolve its internal problems. As a consequence, refugees with other options and those who are not already securely employed have returned home, preferring to rebuild their lives in Afghanistan to facing the uncertainties, indignities and social and economic costs of living as refugees in a country now viewing them as burdensome. Now gone, particularly from IRC's Medical Program, are the comparatively wealthy, the well-dressed landed and urban refugees. But many of the educated, particularly the women, still remain. Still refugees also are the poorest, the elderly, the female-headed households, those who are increasingly predominant among the beneficiaries of IRC's refugee programs. All those who leave take back with them the most precious commodity within IRC's sum total of refugee assistance in Pakistan - the basic education, enhanced health awareness and fundamental life skills which will only improve their lives in Afghanistan.

Around one million Afghan refugees remain, some 100,000 of whom are classified as *vulnerable* in the UNHCR terminology, who have everything to lose by returning to a devastated country that ranks fifth from the bottom in UNICEF's 1996 social indicators. These vulnerable are joined by the large number of others who fear that as long as a central government holding sway over the entire country is not in place, internecine rivalries and the perpetual making and unmaking of factional alliances will continue to render law and order only an ephemeral concept. Recent shifts in alliances appear to have proven them right.

Afghans both in Pakistan and Afghanistan are, in their different ways, suffering much. It is only the generosity of our donors that has enabled IRC to serve them in both countries and to serve them well. For this IRC-Pakistan would like to express its deepest gratitude.

Linda Anderson
Country Director



Techniques for successful market gardening are just one of the activities undertaken at IRC/RPA's Agricultural Rehabilitation Centers

INTERNATIONAL RESCUE COMMITTEE

MISSION STATEMENT

Founded in 1933, the International Rescue Committee is the leading non-sectarian, voluntary organization providing relief, protection and resettlement services for refugees and victims of oppression or violent conflict. IRC is committed to freedom, human dignity and self-reliance. The commitment is reflected in well-planned resettlement assistance, global emergency relief, rehabilitation and advocacy for refugees. Now operating in more than 209 countries around the world, IRC began its assistance programs for Afghans in 1980.

PAKISTAN

EDUCATION

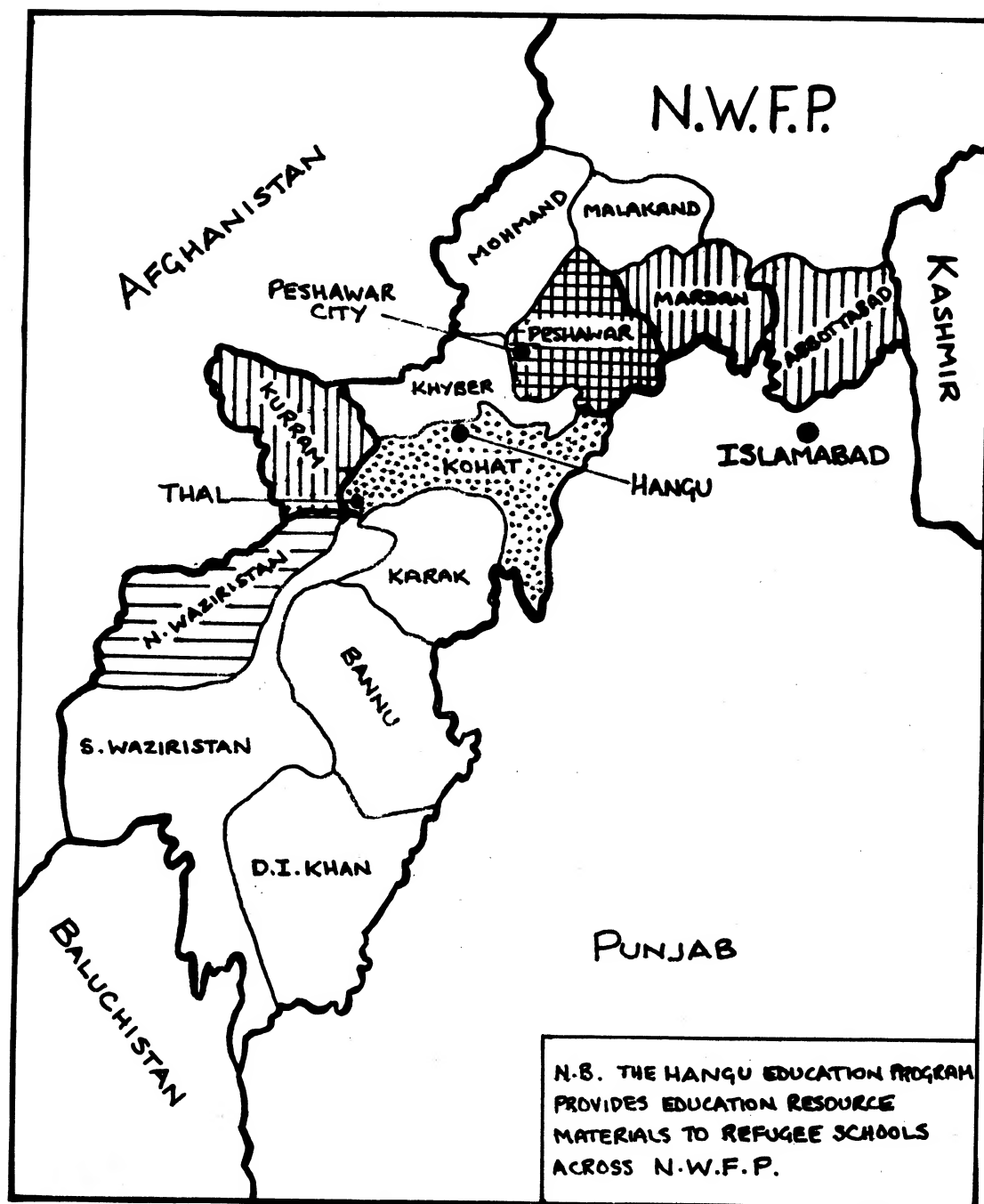
- ❖ FEMALE EDUCATION
- ❖ CONSTRUCTION RELATED TRAINING FOR AFGHANISTAN
- ❖ PROFESSIONAL DEVELOPMENT
- ❖ SELF-RELIANCE PROGRAM

MEDICAL SERVICES

- ❖ HANGU MEDICAL PROGRAM

IRC Program for Afghans

Project Area Map - Pakistan



-  FEMALE EDUCATION PROGRAM, PROFESSIONAL DEVELOPMENT, CONSTRUCTION RELATED TRAINING FOR AFGHANISTAN.
-  FEMALE EDUCATION PROGRAM, SELF-RELIANCE PROGRAM, HANGU MEDICAL PROGRAM.
-  SELF-RELIANCE PROGRAM.
-  FEMALE EDUCATION PROGRAM.

FEMALE EDUCATION PROGRAM

The education of women plays a vital role in the development of a nation, and yet a 1996 report on the state of the world's children found that among children not attending school there are twice as many girls as boys, and among illiterate adults there are twice as many women as men.¹ The expansion of a woman's creative and intellectual horizons not only confers important personal benefits, but larger social benefits as well.

An educated woman is likely to marry later and have fewer children; she will also be more productive at work - and better paid - having acquired the skills to obtain a better job. Women's education is particularly important for the successful rehabilitation and development of war-ravaged Afghanistan. It is for this reason that during more than fifteen years of work with Afghan refugees in the Northwest Frontier Province (NWFP) of Pakistan, the International Rescue Committee has placed special emphasis on promoting educational opportunities for Afghan females.



Afghan women learn about disease vectors at WHETP

IRC's Female Education Programs (FEP) have ranged from supporting community-based pre-schools and primary/secondary schools to courses for women in the fields of pre-school education, public health, public administration and English-language development. The objective of all these programs is to provide Afghan women with the skills they need to take an active part in the rehabilitation of their country. All of FEP's activities have been facilitated by the quality, effectiveness and cultural sensitivity of their approach which, over the years, has engendered trust within the Afghan community, heightened awareness of the need for education, and helped to meet the increasing demand by Afghans for better education for their children.

¹ Carol Bellamy, *The State of the World's Children 1996* (Oxford University Press), p. 71.

Female Education and Teacher Training Program

Two essential components of all IRC educational programs for Afghans are thorough teacher training and the use of student-centered teaching techniques. A 1990 UNICEF report on education for Afghan children attributed the very low attendance of Afghan females in schools supported by NGOs in Afghanistan to the absence of female teachers.² One component of IRC's Female Education and Teacher Training Program (FETT), established in 1991, is therefore the teaching-technique and subject-matter seminars needed to increase the ranks of skilled female teachers, and the extensive monitoring and supervision required to consolidate their knowledge. The other component is the provision of material support to female refugee schools.

- *In 1995 137 female teachers were trained in teaching-technique seminars. Ten shorter pedagogical technique workshops were held for 82 female teachers in the refugee camps. Over 2,700 monitoring visits were made.*
- *FETT supported 27 girls' schools with a total student body of over 10,000.*
- *Over 2,700 monitoring visits were made to working teachers.*

- ***Teacher Training and Monitoring for Primary School Teachers***

In 1995 137 female teachers were trained in five 24-day teaching technique seminars, a number more than double the 1995 target. During the pedagogical technique seminars, teachers learn how to plan lessons, prepare test questions, manage their classrooms and use effective teaching techniques to respond to the needs of their pupils. A seminar was also held in August in Jalalabad, Afghanistan, for 32 volunteer female teachers in the tent schools established by IRC for displaced persons in New Hadda Camp. Ten shorter pedagogical technique workshops were also held for 82 female teachers in the Pakistan refugee camps.

As in all IRC teacher training workshop and seminars, participant-centered instructional techniques were used throughout. To reinforce and consolidate the training, 901 teachers received monitoring supervision by FETT trainers during the year. In these visits, the trainers check teachers' daily lesson plans and observe one of each teacher's classes, following the observation with feedback to the teachers on specific areas of strength and weakness, together with constructive suggestions on how to improve the lessons. Teachers experiencing difficulty are always revisited at a later date.

- ***Subject-Matter Seminars***

Subject-matter seminars are organized for teachers in FETT schools to ensure continuing high-quality instruction for the students. A total of 6 subject-matter seminars - in social science, mathematics, English, Dari and Islamiat - were conducted for FETT teachers who had already taken the teaching technique seminar.

- ***School Support***

At the beginning of the new school year in September 1995, FETT was supporting 27 girls' schools with a total student body of 10,374. FETT support for schools includes financial assistance for academic salaries, instructional materials in the form

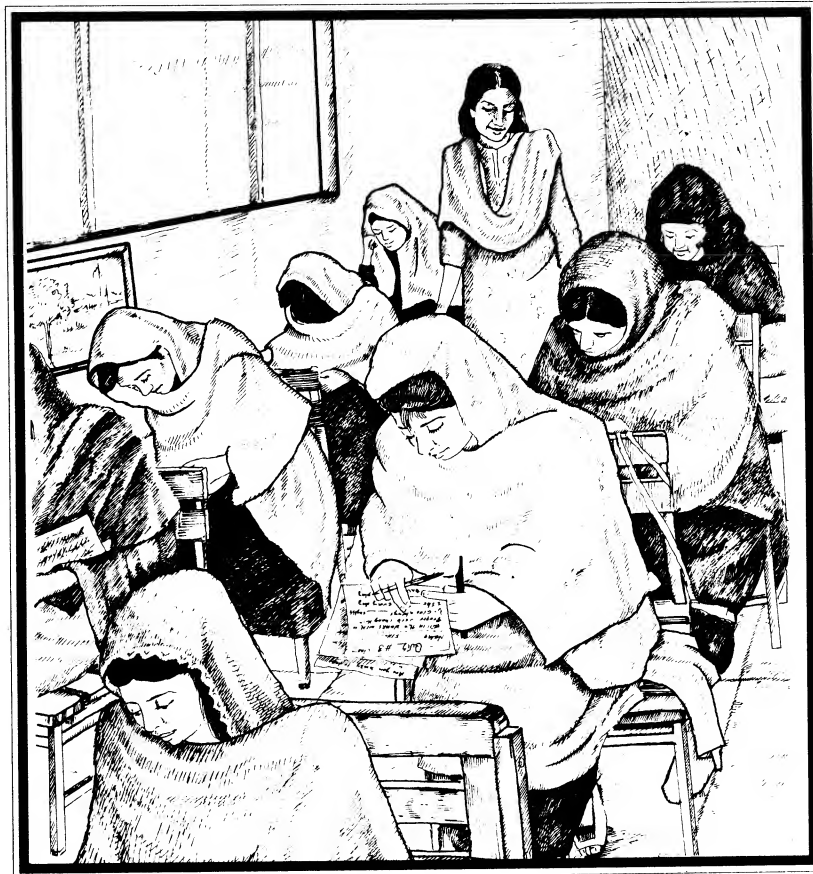
² Susan Holcombe, *Draft Situation Analysis of Afghanistan* (UNICEF, 1990), p. 55.

of textbooks, notebooks and other educational supplies such as blackboards, paper, pens, pencils, floor coverings and chairs.

At the beginning of 1995 the sustainability of the female education system became a central issue of the Program. The community mobilization and consciousness-raising, already fixtures of the Program for some years now, were considerably intensified in order to induce refugee communities to assume more financial responsibility for the education of their children. Salaries for non-academic staff and school rental and utility expenses are now fully assumed by the school communities, as is a portion of the academic staff salaries.

Women's English Language Program

The Women's English Language Program (WELP) has provided English-language instruction to Afghan women since 1985, and regularly trains over one thousand students every year. Notwithstanding the recent proliferation of competing private language courses in the vicinity, due to its reputation for quality instruction there is a constant demand for IRC/WELP courses among the female Afghan refugee population.



Afghan women doing English language exercises

The two main activities of the program are the teaching of English as a foreign language, and the training of English teachers. In 1995, WELP offered three terms of education in English as a foreign language, training over 1,800 women.

It also offered an advanced-level intensive English course for potential English teacher trainers and graduated ten students, six of whom are currently teaching for WELP.

- *In 1995, WELP trained a total of 1,860 women in English as a foreign language.*

To upgrade the sometimes meager language proficiency of teachers of English in FETT-supported schools, a special training workshop was also organized for nine Afghan primary-school teachers.

Women's Public Administration Program

The Women's Public Administration Program (WPA), established in 1990, continued to offer Afghan women the opportunity to acquire skills in typing, computers and office management necessary to ensure their active contribution in agencies working for the reconstruction of Afghanistan. A total of 258 students were trained in typing and various computer software packages, while only 6 students enrolled in office management and bookkeeping.

- *A total of 258 students were trained in typing and computer software packages.*

The program therefore redirected its focus to computer and typing training exclusively, and at the beginning of the year was fully combined with the WELP program to form the new Women's English Language and Computer Program, which offers a streamlined package of skills training in high demand among educated Afghan women.

Women's Health Educator Training Program

The Women's Health Educator Training Program (WHETP), established in 1989, seeks to improve the personal hygiene, nutritional awareness and general health of refugee families and communities. It accomplishes this objective by carrying out three main activities:

1. Conducting a 4-month training course that prepares Afghan women to be public health educators in refugee hospitals, clinics and schools, teaching health messages in primary disease prevention to Afghan women and children.
2. Facilitating the establishment of health education departments in such facilities and the placement of trained health educators in those departments.
3. Upgrading the health awareness of primary school children by training primary school teachers in basic health education issues.

- *WHETP trained 59 women during two health educator training courses in 1995.*

Three 10-day workshops were also held for Afghan primary school teachers, in which 88 teachers were trained in first aid, AIDS, nutrition, microbe theory, and communicable diseases. Eight hospitals and clinics and 18 schools for Afghan refugees enjoyed the services of health educators trained by WHETP. The work of all health educators is regularly monitored by program staff to ensure that program

standards of effectiveness, proficiency and relevance are adhered to. In all instances hospital and clinic administrators frequently remark on the enhanced cleanliness visible in both the hospital compounds and among the patients seen.

Kodakistan Education Program

The International Rescue Committee's Kodakistan Education Program (KEP) has been providing early childhood education for Afghan refugees in the North West Frontier province of Pakistan since 1988. *Kodakistan*, meaning *place of children*, is the Dari word for a pre-school.

- *Two four-month ECETP courses trained a total of 48 women as pre-school teachers.*
- *A total of 22 outreach kodakistans were in operation by the end of 1995.*

The goal of KEP is two-fold: To give learning and development opportunities to Afghan refugee children between the ages of three months and seven years, while at the same time providing Afghan women with the training and resources necessary to manage sustainable and culturally-appropriate early childhood education centers for a community's children.



A KEP parent-teacher meeting

The first half of KEP's mission is achieved through the **Early Childhood Education Training Project (ECETP)**, which provides language development, child psychology, health and nutrition, art, pedagogy and Islamic studies for pre-school children. To complement the course work, two model kodakistans provide trainees with the opportunity to gain practical experience during the course. Graduates of the course

possess all the skills needed to establish, teach in and administer kodakistans in their own communities, whether as refugees or in Afghanistan. Two four-month ECETP courses were offered in 1995.

The other half of KEP is centered on the **Outreach Kodakistans**, whereby small-scale, mostly home-based pre-schools are established by ECETP graduates in their own communities in Peshawar and outlying refugee camps. The KEP training team visits these kodakistans, monitoring the quality of instruction and providing guidance, assistance and materials to the staff when possible. A total of 22 outreach kodakistans were in operation by the end of 1995, 13 established by ECETP graduates in their own homes, and 9 in Afghan refugee girls' schools. These pre-schools are primarily self-supporting, with KEP responsible for providing only teachers' salaries, instructional materials, and technical support. The parents of the pre-school children provide most other needed materials.

The **KEP Resource Center**, situated on the site of the KEP model kodakistan, is responsible for the development of original KEP materials such as low-cost teaching aids and toys, and the translation of early childhood education materials into Dari and Pushto. The materials in the KEP resource center and library are extensively used by pre-school teachers in the model school as well as the outreach pre-schools.



CONSTRUCTION RELATED TRAINING PROGRAM FOR AFGHANISTAN

The reconstruction needs of Afghanistan are vast and daunting. Ten years of bitter armed struggle against Soviet imperialism, followed by the 1992 outbreak of internecine fighting between the erstwhile allied Afghan freedom fighters have destroyed much of the country's roads, bridges, irrigation systems, airports, public buildings, shops and homes. Recognizing the urgent need to rehabilitate public and private infrastructure in Afghanistan, the International Rescue Committee in 1987 brought together a group of exiled engineering professors from Kabul University to train new engineers and construction professionals to assist in the reconstruction of their country. The intention of this institution was to preserve the academic staff, curriculum and traditions of Kabul University's Faculty of Engineering until such time as it could be returned to Afghanistan.

The CRTA program was historically comprised of three components:

1. Construction Engineering Program
2. Construction Supervision Program
 - A. Construction Supervisor Program (9 Months)
 - B. Assistant Engineering Program (18 Months)
3. Refresher and Professional Development Program

In 1993 and 1994, a decline in funds available for humanitarian assistance in Afghanistan forced long-time donors to CRTA to reduce their support. By the middle of 1994, only the Construction Engineering Program remained. This 36-month civil engineering course followed a curriculum similar to that offered at the Kabul University Faculty of Engineering before the war, interspersed with practical field training in which students had the opportunity to apply the theory they learned during the academic sessions.

A new source of funding for CRTA was secured in late 1994. The veteran Afghan NGO, Coordination of Humanitarian Assistance (CHA) in Herat, which enjoyed European Union backing, took over administrative management of CRTA in early 1995 and relocated it in Herat, with the ultimate objective of incorporating it into Herat University. As the last group of CRTA engineering students were finishing their course of study in Peshawar in April, over 60 new students were entering the program in Herat. CRTA graduated its final class of 20 engineering students in Peshawar and closed its doors on June 29, 1995. Most of the remaining staff transferred to the Herat program.

During the nine years that CRTA operated under the auspices of IRC, nearly 100 young men graduated from the university-level civil engineering program while just under 300 completed courses of study for supervisory positions in construction projects where they provide engineering expertise to construct roads, canals, bridges, building and other facilities. Many of these students are now working in organizations involved in the reconstruction of Afghanistan.

**Construction Related Training Program for Afghanistan Graduates:
1989 - 1995**

<i>Courses of Study</i>	<i>Total Graduates</i>
Construction Engineering	89
Construction Supervisor	204
Assistant Engineering	93



PROFESSIONAL DEVELOPMENT PROGRAM

Men's English Language Teaching Assistance

After the suspension of IRC's Men's English Language Program in 1993, many of

its former instructors and advanced-level students joined or established private English language centers in border areas of Pakistan and throughout Afghanistan. There is a high demand for English-language instruction among Afghans, who view English skills as necessary for obtaining employment in international organizations and businesses which are in turn increasingly seeking to replace expatriate supervisory staff with Afghans.

Due to the continuing need for quality English-language instruction and the expectation that the lack of technical assistance from IRC since mid-1993 had caused an erosion in the skills of the English teachers working in the centers, IRC decided in mid-1994 to resume its support to English-language centers through engaging an English-language training specialist, provided by the U.S. Information Service in Pakistan, to refresh and upgrade the language, pedagogical and curriculum-development skills of local English instructors at private language centers.

The Test of English-Language Proficiency (TELP), subsequently administered to 62 interested English-language instructors who represented 21 language centers from the greater Peshawar area, revealed that few indeed exhibited the appropriate level of proficiency even in English. Fifty-four of the more advanced instructors were chosen to participate in the seminars.

A series of 10 skill-development workshops were developed by the English-language specialist. The topics included learner-centered teaching methods, organization of activities, observation of learner skills, development of tests and lesson planning, as well as classroom management, professionalism and cooperation, learning to employ resources and adapt materials and the use of self-evaluation/critical reflection to improve personal teaching styles.

Incorporated into the workshop series were regularly scheduled in-service observation sessions during which the specialist monitored the performance of individual teachers following the workshops and provided guidance and feedback. Of the 54 participants, 45 were able to attend the workshops regularly and received certificates upon completion of the series in May.



SELF-RELIANCE PROGRAM

IRC's Self-Reliance Program (SRP) was established in 1985 to provide vocational training and facilitate employment and income generation for Afghan refugees residing in Peshawar and in the Hangu-Thal areas and neighboring Tribal Agencies. There are an estimated 15,794 "vulnerable" refugees who qualify for SRP assistance - widows and those in female-headed families without an able-bodied man, the disabled, the orphaned, the aged with no family links in the refugee villages, and others living in especially precarious or difficult circumstances. The training and assistance

activities carried out through the Self-Reliance Program not only augment eligible refugees' abilities to support themselves while in exile, but also to help ensure their livelihood in Afghanistan after repatriation.

In previous years, the SRP program operations spanned construction/maintenance, a wood and metal workshop, a printing press, handicraft, credit-scheme and agricultural activities. In 1995, the program was reduced to its income-generating component, offering apprenticeships in diverse trades and tailoring training and providing in-kind loans through a credit scheme. The program's services -- the water supply program and the self-reliant gabion production, printing press and Health Education Resource Center activities -- continued to flourish, while the wood and metal workshop proceeded on a markedly reduced scale.

Income Generation

To enhance refugees' income-generating abilities, IRC provides in-kind loans and small business assistance, apprenticeship and vocational/skills training to Afghan refugees residing in refugee villages in Kohat and Bannu districts, and the North Waziristan, Kurram and Orakzai Agencies of NWFP.

A novelty introduced into the program in 1995 was the basic small business management training which began as a pilot project to complete the vocational training process. The management training includes the topics of bookkeeping, inventory control, pricing, marketing and quality control of products. In 1995, SRP also increased its monitoring and follow-up guidance.



A disabled apprentice tailor plies his new trade as a result of the SRP apprenticeship training scheme

- ***Apprenticeship Training for Men***

In 1995, 40 vulnerable male refugees were apprenticed, with SRP assistance, to various trades- and craftsmen located in the project areas. Following the apprenticeship training, which lasts between four and nine months, the newly-trained apprentices were trained in small business management skills and were regularly monitored thereafter to ensure the continuing viability of their businesses. SRP sponsored the following apprenticeships in 1995: auto mechanics, men's tailoring, embroidery, shoe-making, radio repair, auto wiring, puncture repair, goldsmithing, welding, tin-smithing, watch repair and electrical repair.

All 40 apprentices, who completed their training by the end of 1995, were in a position to start their own businesses either individually or in partnership with their trainers. Fifteen of the apprentices took loans in the form of the tool kits needed to start their own businesses.

- ***Tailoring Centers for Women***

During 1995, tailoring training was provided to 72 vulnerable women in six camps. The training took place for six hours per day over a period of four months in which trainees learned to produce men's, women's and children's traditional Afghan clothing. The trainees received a sewing machine as a loan and were given a sewing table, scissors, material, paper and thread. After passing a final exam, receiving a certificate of graduation and completing repayment of the sewing-machine loan, participants possessed everything needed to utilize the equipment and training to generate income for their families.

- ***Credit Scheme***

The SRP's Credit Scheme was launched in 1987 to foster income generation opportunities for vulnerable Afghan men and women. Geared toward the promotion of traditional enterprises, the project enables Afghan women and artisans to establish their own small businesses by issuing interest-free loans of tools, equipment or animals. All loans are repaid in instalments within a maximum period of 12 months.

- ***40 vulnerable male refugees were apprenticed to different trades and craftsmen in NWFP.***
- ***Tailoring training was provided to 72 vulnerable women in six refugee camps.***
- ***The project made a total of 40 loans for self-employment to skilled artisans among the orphaned and disabled male refugee population.***
- ***SRP issued a total of 52 goat, 48 sewing-machine and 28 cushion-weaving loans to vulnerable Afghan refugee women.***

During 1995, the project made a total of 40 loans in the form of small start-up tool kits for self-employment, to skilled male artisans among the orphaned and disabled refugee population. These recipients, identified by IRC in consultation with UNHCR's Social Welfare Cell in Kohat, Hangu-Thal and North Waziristan, chose the type of loan that best met their skills and needs. The 40 loan recipients included tailors, shoe-makers, auto mechanics, embroiderers, barbers, tinsmiths, carpenters, bakers and welders.

SRP's Credit Scheme program also created business opportunities for widows and other needy women through its goat, sewing machine and cushion-weaving loans. Fifty-two goat loans were made during the year, and the loan recipients received business training in the marketing of goat products.

SRP increased its sewing-machine loans from 40 to 48 in response to the keen demand expressed by female refugees in the Credit Scheme program of tailoring loans. To achieve this increase, SRP decided to divert loans from the goat program, where demand was substantially less. In previous years, the project had donated sewing machines to the tailoring trainees on graduation, which they used to sew items for their families and neighbors, and to instruct others in the art of sewing. In the new 1995 spirit of community accountability and participation, SRP decided to loan sewing machines to the newly trained seamstresses who were to repay the full cost of the machines. When the women resisted this program change, UNHCR took the decision to issue edible oil as part of the package, thereby lifting one demand on the women's financial resources. SRP's female supervisor and field officers also provided business instruction to these loan recipients, advising them on bookkeeping practices, inventory control, marketing and designing choices, all of which will increase the women's business opportunities and profit.

A total of 28 cushion-weaving loans were issued during the year to eligible refugee women. The revenue gained from the sale of each cushion produced greatly enhances their families' monthly income. As with male loan recipients, repayment under the female credit schemes is made possible through income generated through the sales of articles crafted.

Services

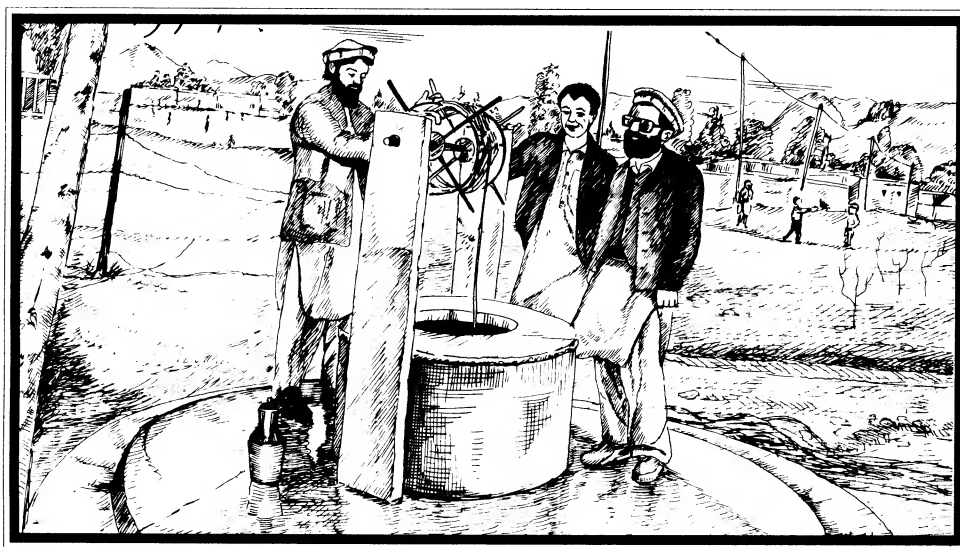
• *Water Supply Program*

The aims of the Water Supply Program, which operates under the aegis of UNHCR, are threefold: to ensure an adequate supply of potable water for the nearly 20,000 refugee families living in the Hangu-area camps, to control water-borne diseases by maintaining and repairing water supply facilities, and to improve the refugees' abilities to provide themselves with their basic water needs by encouraging community responsibility for water supply.

• *During 1995, IRC's Water Supply Program developed 100 shallow wells, installed 147 hand pumps and drilled three boreholes in approximately 30 camps in NWFP.*

UNHCR's attempt, initiated in 1994, to increase refugee community self-reliance in the operation of their water supply systems was beset with certain growing pains in 1995. The refugee Water Management Committees (WMCs), which had been created to take responsibility for the elaborate tube-well pipe schemes in the camps where they existed, were not everywhere operational. Responsibilities included paying for fuel, utilities and minor repairs, while IRC conducted the major repairs. For communities without tube-well systems, IRC was entrusted with the task of developing shallow wells throughout the camps, a more affordable water supply strategy and one more amenable to refugee management.

During 1995, IRC's Water Supply Program developed 100 shallow wells, installed 147 hand pumps and drilled three boreholes in approximately 30 camps in NWFP. The Program was unable to meet its target of 200 shallow wells due to disagreements amongst the members of the local community Water Management Committees over the type of water delivery system to retain or develop. The Water Supply Program also provided regular maintenance and chlorination services for the water supply systems, employing a shallow well engineer, mason, sinker and laborers to maintain 125 improved shallow wells.



SRP wells provide safe drinking water for camp residents throughout N.W.F.P.

During the first half of 1995, a 6,500 liter water tanker made 533 trips to Lakhti Banda, Kotki I and Kotki II camps in which no other water supply source was available. The water tanker ceased operation as of June 30, 1995, in accordance with UNHCR policy.

- ***Gabion Production***

A gabion is a wire mesh panel which, when assembled, forms a one cubic-meter cage. When filled with stones, the cage becomes a cost-effective erosion control barrier that can be used in agricultural projects and dam, dike and road construction. In 1994, SRP transferred its gabion-weaving project to the province of Khost in Afghanistan. In 1995, the project produced substantial revenues for the year through contracts with other IRC programs, international NGOs and the local private sector.

- ***Wood and Metal Shop***

Although closed to all intents and purposes in late 1993, the Wood and Metal Shop continued to employ skilled laborers on a contract or piece-work basis. During the year, the Shop produced blackboards for IRC's Hangu Education Program and tailoring tables for the SRP Credit Scheme Program and supplied other small private orders.

- ***Printing Press***

Fully managed and operated by Afghan refugees since its establishment in 1985, the Printing Press has from the outset focused on the printing of textbooks for primary and secondary Afghan school students, both in Pakistan and in Afghanistan. It also offers a wide range of printing, desk-top publishing and binding services to government, non-governmental, U.N. and local customers. Completely self-sustaining, the Press printed 380,000 textbooks and 3,000,000 notebooks in the course of the year. At the beginning of 1995, the Press opened a branch plant in Jalalabad, inside Afghanistan.

- ***Health Education Resource Center***

Established in 1986, the Health Education Resource Center (HERC) develops and provides health education resource materials to IRC as well as international and national NGOs and members of the U.N. family. Its services include the design, field testing and production of medically relevant and culturally appropriate public health messages which are then reproduced on silk screen or plastic. The original posters, flip charts and other media which HERC produces are used for training in a wide variety of settings such as clinics, schools and hospitals as well as in community gatherings. Poster themes have dealt with the main health issues affecting the refugee population, ranging from diarrhea, malnutrition, malaria, acute respiratory infection and sanitation to drug-control, goiter, immunization and safe motherhood.

Completely self-supporting from the sale of its materials since January 1993, HERC completed contracts for 11 NGO and U.N. clients. HERC's brisk business and proven viability have put it on track to become an independent entity in the course of next year.

All drawings in this report are the products of HERC's own artists.



HANGU MEDICAL PROGRAM

The International Rescue Committee (IRC) began its medical program in the Northwest Frontier Province (NWFP) of Pakistan in 1980 in response to a massive influx of Afghan refugees. At that time, IRC's two mobile clinics offered curative services just inside the border of Pakistan. By 1985, IRC's Hangu Medical Program stretched from Kohat to Thal and provided curative and preventive services to more than 200,000 refugees in 12 camps.

The core component of the Hangu Medical Program is the Basic Health Units (BHUs) operating in the refugee camps in the Hangu-Thal area, serving a total population in 1995 of about 167,000. Each BHU is headed by a male and/or female medical officer, and consists of two Lady Health Visitors (LHVs) who work in the Maternal and Child Health clinics (MCHs), a vaccinator, two Malaria Supervisors, three to four Community Health Supervisors (CHSs), two Dressing Health Workers

(DHWs), between four and six *dais* (maternal and child health care workers), a dispenser and support staff.

During its 15 years of service in this region, the Medical Program has seen substantial progress made in several critical areas. In the early 1980s, diseases such as malaria, measles, whooping cough and tuberculosis were constant threats to the communities, as were chest and skin infections, malnutrition and diarrhea. Today the incidence of all the EPI target diseases has been greatly reduced - tuberculosis is within international control levels, and diarrheal disease and mortality, as well as malnutrition, are low.

In 1995, UNHCR began to phase down its refugee assistance by consolidating, handing over or closing down many of the basic health units it had supported over the years. The Hangu Medical Program had already revised its service strategy to place greater stress on promoting health care awareness and basic health care self-sufficiency on the part of the refugee population. While the overall goal of the Medical Program remained unchanged - to address effectively the health problems in the refugee community as well as to improve refugees' chances of maintaining healthy families after their return to their homes in Afghanistan, major modifications were made at the beginning of 1995.

Following suit in the UNHCR plan for the phase-out of assistance to all but the most vulnerable Afghan refugees in Pakistan, IRC-Pakistan halved the number of BHUs, from twelve to six. The medical teams rotating among the six active BHUs were also reduced. The six BHUs selected to remain active were chosen as a function of three criteria: 1) their geographical location within the IRC territory coupled with their location in relation to other health facilities available; 2) the size of the resident refugee populations concerned; and 3) the relative poverty levels of the camp populations.

To ensure proper patient care, the extra workload created by the doubling of the clinic-to-population ratio was distributed amongst remaining BHU staff members by dividing up the staff, on certain days, into half-teams to ensure that at least five of the six operating BHUs were open five days a week. In each of the six camps where medical team services are no longer provided, a core staff of one Malaria Supervisor and one Community Health Supervisor are retained to provide the population of the camp with a link to the Hangu Medical Program and perform basic malaria, birth and death reporting, defaulter tracking and referral services as well as assisting medical staff in their outreach activities. In each of the six camps with functioning BHUs, each unit is still staffed, on the days that the medical team is absent, by a Malaria Supervisor, *dais* and gate-keepers.

The perhaps greatest change occurring in the Medical Program in 1995, one which was mandated not only by sharply decreased funding but also by the need for greater sustainability of the Medical Program, was the introduction of fees for services rendered. The purpose of requiring community contribution was twofold: to accustom refugees, as in the IRC education programs, to paying fees for services received, and also to subsidize activities to a modest extent in the crucial MCH clinics, which refugee leaders themselves agreed to be the most indispensable sector

of the Hangu Medical Program. All patients visiting the main clinics began paying a standard fee of Rs. 5 for each visit, except for the MCH activities, which were available at a nominal fee of Rs. 1 per patient. Vulnerable women and men identified by the IRC Medical Program staff as well as children aged three and under - the perennially most exposed sector of the refugee population - who visited the main clinics were also charged the nominal fee of Rs. 1 per visit. Patients visiting the dental clinic also paid fees for the various dental procedures, the rates varying between Rs 5 and 10. The labor for the malarial spraying and vector control campaigns was defrayed in full by the communities in the camps being sprayed.

Primary Health Care Services

While the Hangu Medical Program continued to provide both curative and primary health care services during 1995, the emphasis was placed on expanding its preventive and health education services in an effort to reduce dependence on clinical services further and to provide the refugees with stronger basic health maintenance skills to help ensure healthier families after their return to Afghanistan.

- *A total of 4,118 pregnant women, or 66.6 percent of the estimated total pregnancies for the year, registered with an MCH clinic in the six operating BHUs.*
- *During 1995, the MCH clinics registered 5,214 children under three years of age, of which 96.2 percent were under one year .*
- *The number of cases of severe malnourishment was 49 percent down from 1994 levels.*
- *The LHVs provided refresher training for 296 FHWs and health education sessions for over 33,000 women and students in refugee girls' schools.*

In the early years of the Hangu Medical Program, the refugee communities consistently resisted all but the water supply efforts. Today, through a gradual and collaborative effort involving every section of the Medical Program and members of the local communities, refugees are fully aware of the importance of the prevention and treatment of diarrheal diseases and the EPI target diseases, the prevention of childbirth-related morbidity and mortality, nutrition monitoring for infants and young children, and the prevention as well as treatment of malaria and tuberculosis. Through recent emphasis on outreach and paramedical health services, the Program has made great progress in educating and raising awareness among refugees about critical health issues, especially that of disease prevention, and has so far been able to reduce the medical teams needed by 50 percent and the medicine expenditures by 52 percent.

- ***Maternal and Child Health Program (MCH)***

Focusing on the most vulnerable groups and the most critical health issues, the Hangu Medical MCH Program stresses the health needs of women and children and seek to address their most common health problems. Operating out of the 6 BHUs, it provides special curative and preventive health services to three particularly vulnerable groups: pregnant women, lactating mothers, and children under the age of five. The components of the MCH program are:

The Antenatal and Postnatal Program, which seeks to improve the health of mothers, ensure safe delivery and improve the health of mothers and infants. Antenatal services include the prevention and treatment of anemia, tetanus-toxoid vaccinations, nutrition education, and the identification of high-risk pregnancies to ensure that deliveries in such cases are conducted by a trained female health worker. Most newborns receive medical attention by a Lady Health Visitor (LHV) or medical officer within the first 10 days of birth. The Lady Health Visitor teams and female medical officers conducted 2,399 post-natal visits, covering 44.3 percent of the reported total births for the year, surpassing the annual target of 35 percent.

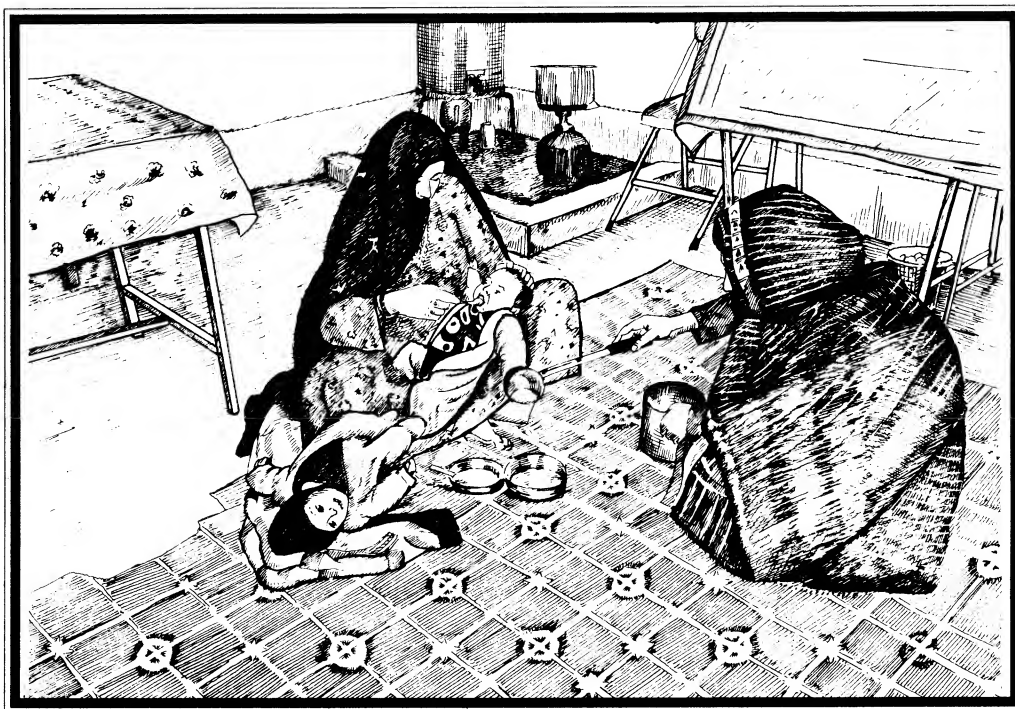
The Under-three Clinic, which seeks to monitor infants' growth and refer them for immunization and necessary medical treatment. Mothers receive education on breast-feeding, nutrition and control of diarrheal diseases; childrens' height and weight are monitored and immunizations kept up to date. In addition, the ORT corners treated a total of 8,805 children with diarrhea, amounting to 81.7 percent of the total diarrhea cases, again exceeding the Program target of 75 percent.

The Nutrition Education Program, which strives to prevent malnutrition through non-formal educational messages on how to prepare healthy, well-balanced meals for the family. Children who are suffering from second-degree or third-degree malnutrition are enrolled in the program, and LHVs visit and monitor third-degree malnourished children in their home environment. At the end of 1995 a malnourishment rate of only 1.05 percent was recorded for the IRC-served camps.

Outreach health workers expand the reach of these special MCH services. Volunteer Female Health Workers (FHWs), chosen by their communities, act as a link between the community and the BHU. Each FHW monitors pregnant women and young children in three to six refugee homes. The responsibilities of FHWs include attending home deliveries and applying safe delivery techniques; referring children and pregnant women to the nearest MCH center for antenatal care, immunizations, and post-natal care; and delivering information on a broad range of health education topics in refugee homes, especially those relating to diarrhea control and immunizations.

IRC's Lady Health Visitors (LHVs) supervise the FHWs and supplement the MCH program's activities at the BHUs by visiting and monitoring pregnant women and malnourished children at their homes, referring pregnant women and children to the BHUs when required, and attending home deliveries.

As would be expected with closure of half the IRC BHUs, there was an overall decrease in patient visits to BHUs ranging between 17 and 45 percent. Testimony to the success of the outreach health education services, however, is the fact that visits to the MCH clinics have decreased the least - an encouraging indication that in absolute numbers, the primary target population of vulnerables is least affected by the closures. In fact, over two-thirds of the patients seen by medical officers were women and children under five years of age.



An IRC Lady Health Visitor during a home visit to a malnourished child

- ***Expanded Program for Immunization (EPI)***

The EPI Program provides immunizations against six preventable diseases: tuberculosis, pertussis, diphtheria, polio, tetanus and measles, and also offers tetanus toxoid vaccinations for pregnant women. Two outreach teams composed of both male and female members provide these services in homes, complementing the vaccination program in the BHUs. These teams also use defaulter lists to track down individuals in order to persuade them to complete the immunization series.

With the decrease in the number of operating BHUs in 1995, the outreach activities of the program were intensified to maintain the fullest coverage possible.

- ***During 1995, a total of 54,985 doses of different vaccines were administered to children under five years of age, mostly to infants under one year.***
- ***The coverage for 1995 is greater overall than that achieved in 1994, a result of the vaccination teams' motivation and health education efforts. The overall dropout rate is only five percent.***

Despite this year's decrease in the supply of vaccines, coverage for 1995 was greater overall than that achieved in 1994 -- a result of the vaccination teams' motivation and health education efforts.

- ***Community Health Worker Program (CHW)***

A key factor in the accomplishment of raised health-care awareness among the refugee population has been the development of an extensive network of volunteer Community Health Workers (CHWs) who, headed by Community Health

Supervisors (CHSs), play an important role in the Program's shift in focus from curative to preventive services. The CHW Program is responsible for improving the health status of the refugees by conducting health education activities in the community and the BHUs and by referring patients to the appropriate medical services. Like the FHWs and LHV, the CHW program staff act as a link between the community and its BHU. Each CHW, in accordance with UNCHR guidelines, is assigned to 30 families. To date, a total of nearly 3,800 volunteers have been trained as extension workers.

- *The approximately 500 active CHWs paid a total of 142,456 home visits during the year.*
- *CHWs conducted health education lessons for 45,839 participants in BHUs, schools and during community gatherings, exceeding the number of sessions held in 1994.*

The CHWs have three primary tasks: teaching health improvement lessons to families, treating minor illnesses, and referring patients to the BHU health programs. CHWs always work closely with the EPI staff, motivating families to register in the program so that children and pregnant mothers receive the required vaccinations. During their home visits, they deliver health education messages regarding seasonally related illnesses, focussing on respiratory tract infections, malaria, skin infections, typhoid, hepatitis and diarrheal diseases. In addition to their home visits, the CHWs also conducted health education lessons for 45,839 participants in BHUs, schools and during community gatherings, exceeding the reach achieved in 1994.



An IRC Lady Health Visitor checks a child for signs of malnutrition

- ***Malaria Control and Sanitation Program***

The Malaria Control and Sanitation Program works to control diarrheal disease, malaria, and water-borne illnesses by providing waste management and malaria control as well as environmental health education to refugees in the Hangu/Thal camps. The sanitation staff maintains existing latrines in BHUs and schools and, where raw materials are available, offers them to families who carry out the maintenance of their own latrines or who wish to build new ones. Technical assistance is offered to those building a latrine for the first time. During 1995, the Program constructed 22 new latrines and maintained 3 for the Hangu Education Program tent schools.

- ***During the year, the Malaria Supervisors working with the communities eliminated 1,680 stagnant ponds, disposed of solid waste at 2,111 sites and cleaned the areas surrounding 2,571 water sources.***
- ***During 1995, the Malaria Supervisors conducted 1,594 health education sessions related to malaria prevention for a total of 11,440 participants.***
- ***Ninety-five percent of the total number of houses in the four camps selected were sprayed for malaria, the cost of the spray being borne by the communities.***

To eliminate vector-borne diseases, the Malaria Control Program sponsors community health education sessions and conducts campaigns to destroy mosquito breeding sites. Although in 1995 the functioning BHUs were reduced from 12 to 6, the Malaria Supervisors' services were still available in all 12 BHUs. During 1995, the Malaria Supervisors conducted 1,594 health education sessions related to malaria prevention and encouraged communities to keep the areas surrounding wells, springs and surface tanks clean. In testament to the Program's emphasis on outreach health education and preventive care, the overwhelming majority of the malaria cases were treated by Malaria Supervisors in the refugee communities. The Malaria Supervisors' responsibilities also involve motivating communities to dispose of solid waste by burning, burying or physical removal, and to eliminate stagnant ponds through filling, drainage or treatment with kerosene.

In 1995, anti-malarial spray campaigns were conducted in four camps chosen by UNHCR/MSF-Holland as being the most malaria-prone. Prior to undertaking the spray campaign, program staff held meetings with camp elders and residents to motivate them for the campaigns. With the cost of labor paid for by the refugee communities, 95 percent of the total number of houses in the four camps were sprayed.

An experimental program was initiated in mid-1995 by MSF-Holland, in coordination with the Hangu Medical Program, which involved the spraying of cattle with insecticides to ascertain their effect on malaria control. One immediate and highly visible effect of the experiment has been the control of ticks on animals; in 1996, MSF-Holland will follow up with a survey to assess the impact on human illness of the spray campaigns.

Diagnostic and Curative Services

- **Main Clinics**

The Basic Health Unit (BHU) is the foundation of the Hangu Medical Program. The main clinics provide diagnostic and pharmaceutical services to the refugees, and laboratory and referral services that supplement the clinics' capacity to offer high-quality and reliable care. Respiratory tract infections, skeletal aches and injuries, and gastric problems are among the ailments most frequently diagnosed at the main clinics. Malaria, tuberculosis, and diarrheal disease are monitored very closely and are controlled with substantial reliance on preventive and health education services.

Referral Program: Under the referral program, BHU doctors refer patients who require specialized treatment to hospitals in Peshawar and Kohat. When referrals are made, they are usually for specialized consultation, admission to hospital, or surgery. Typical referrals include bone fractures, acute appendicitis, complex abdominal problems, hepatitis, obstetrical complications and chronic cardiac conditions. In 1995, the Program provided transportation and 50 percent of the cost of X-ray charges for 409 patients who were referred to Peshawar and Kohat hospitals.

Pharmaceutical Services:

Each BHU contains a small pharmacy that provides medication to refugees, and stocks all necessary drugs, in accordance with the UNHCR essential drug list, for treating common illnesses in the refugee communities. Special drugs are also provided for chronic-care patients diagnosed in the referral hospitals in Peshawar or Kohat. In addition to dispensing medicine, the pharmacist also advises refugees on how to take the drugs properly.

Laboratory Services:

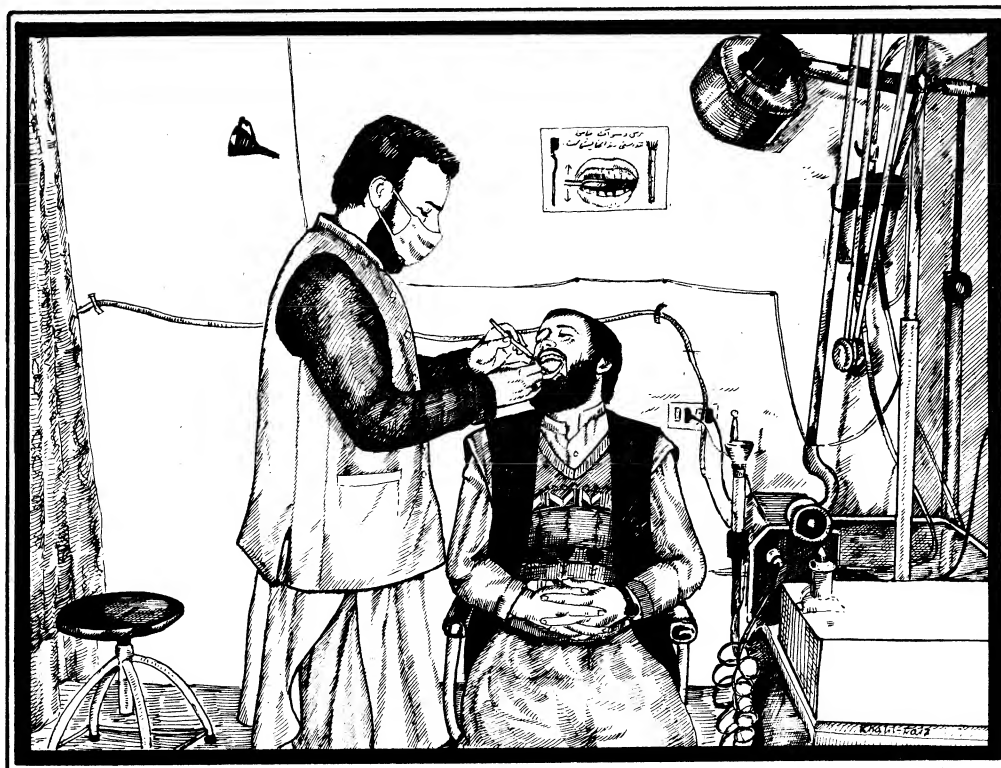
IRC's Hangu Medical Program operates one main laboratory in Hangu and two field laboratories in Mohammed Khoja and Thal II camps which supplement the diagnostic work of the BHUs. The field labs perform malaria, blood and stool tests, and lab technicians examine all slide samples with the exception of malaria slides, which are read by the Malaria Supervisor. The main lab conducts other analyses as well, such as for blood grouping, testing of blood sugar, semen analysis, skin scraping for mycosis and gram stain, the results of which are returned the following day.

- **Dental Program**

IRC first opened a dental clinic in Mohammed Khoja camp in 1988, and to this day delivers the only service of its kind to the Hangu-Thal refugee population.

- *The dental nurse and Community Health Supervisors (CHSs) conducted 434 dental health education sessions for a total of 6,387 participants during the year.*
- *LHVs provided refresher training for 296 FHWs and conducted health education sessions for over 33,000 women as well as students in refugee girls' schools.*

Dental cavities and periodontal disease are particularly common in refugee camps, where they are caused and then aggravated by the endemic conditions of inadequate nutrition and poor personal hygiene. A full array of curative dental services are offered by the dentist in the clinic, while the nurse rotates among 4 BHUs when not assisting the doctor in the clinic. A total of 4,385 patients were treated in the dental clinic and in the BHUs during 1995.



*The HMP dentist performs a unique service for refugees
in the Hangu-Thal area*

As in the Hangu Medical Program as a whole, the Dental Program has strengthened its commitment to preventive medicine, offering preventive dental services and intensifying its teaching of basic dental health maintenance skills.



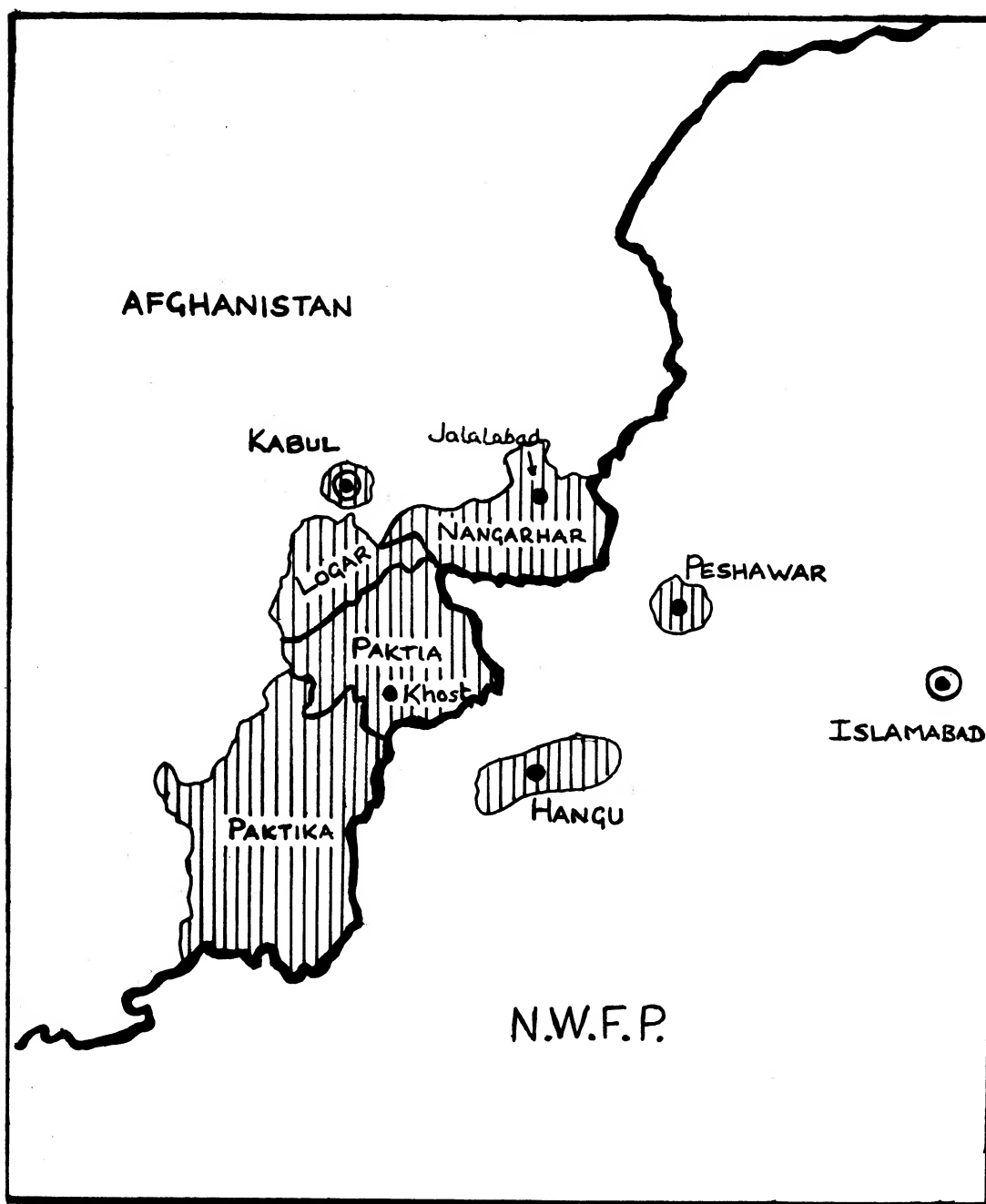
PAKISTAN / AFGHANISTAN

EDUCATION

- ❖ **HANGU COMMUNITY EDUCATION**
- ❖ **SCIENCE AND TECHNOLOGY TRAINING**

IRC Program for Afghans

Project Area Map - Pakistan/Afghanistan



AREAS SERVED BY HANGU COMMUNITY EDUCATION PROGRAM
AND THE SCIENCE AND TECHNOLOGY TRAINING PROGRAM

N.B. REFUGEE SCHOOLS ACROSS N.W.F.P. ARE PROVIDED WITH RESOURCE MATERIALS
AND TEXTBOOKS BY THESE PROGRAMS.

HANGU COMMUNITY EDUCATION PROGRAM

The continued hostilities between political factions vying for power, the emigration of Afghanistan's educated and visionary elite, the destruction of much of the country's infrastructure and civic services and the massive displacement of hundreds of thousands of Afghans have all conspired to strip communities and families of the human, material and financial resources needed for investment in and improvement of the educational system in Afghanistan and in Afghan refugee communities. According to recent estimates, 91 percent of Afghan females and 62 percent of Afghan males remain illiterate, while gross primary school enrollment ratios in Afghanistan were 32 percent for boys and 17 percent for girls between 1986 and 1988.¹

IRC is strongly convinced that education is one of the most effective ways to overcome the socio-economic and political obstacles which currently hinder development in Afghanistan. Unfortunately, in the refugee camps as well as in Afghanistan, childrens' access to education is severely limited by the scarcity of schools as well as constraints on both the families' finances and their geographical mobility. The Hangu Community Education Program (HED) was established in 1988 at the request of the Afghan refugee community in and around Hangu, in the North West Frontier Province of Pakistan. At that time, the aim of the program was to expand access to, and improve the quality of, primary education in the Hangu-area refugee camps. Three years later, in coordination with IRC's Rehabilitation Program in Afghanistan (RPA), the Hangu Education Program extended its activities across the border into Afghanistan and began providing material and teacher training assistance to schools in rural communities in Afghanistan as well.

An additional development has been the full incorporation of IRC's Science and Technology Training (STT) Program and the Hangu Community Education Program into the management structure of the Rehabilitation Program for Afghanistan (RPA). In late December 1995, the STT program was relocated to Hangu, and moved into the offices of the Hangu Education Program. This consolidation achieved more efficient management and greater coordination between the two programs, permitting the effective sharing of creativity, experience and expertise.

- *98 teachers in Pakistan were trained in pedagogical seminars and subsequently monitored.*
- *A total of 66 mathematics and Dari/Pushto teachers in Pakistan were trained during two 18-day seminars.*
- *A total of 27 headmasters and administrators were trained in the school administrators seminar.*
- *A total of 104 primary schools in Afghanistan serving 29,681 students were supported, a number far beyond the year's target of 7,500.*

¹ James P. Grant, *The State of the World's Children 1995*, (Oxford: Oxford University Press), p. 72

To achieve its goals, the Hangu Education Program carries out the following tasks:

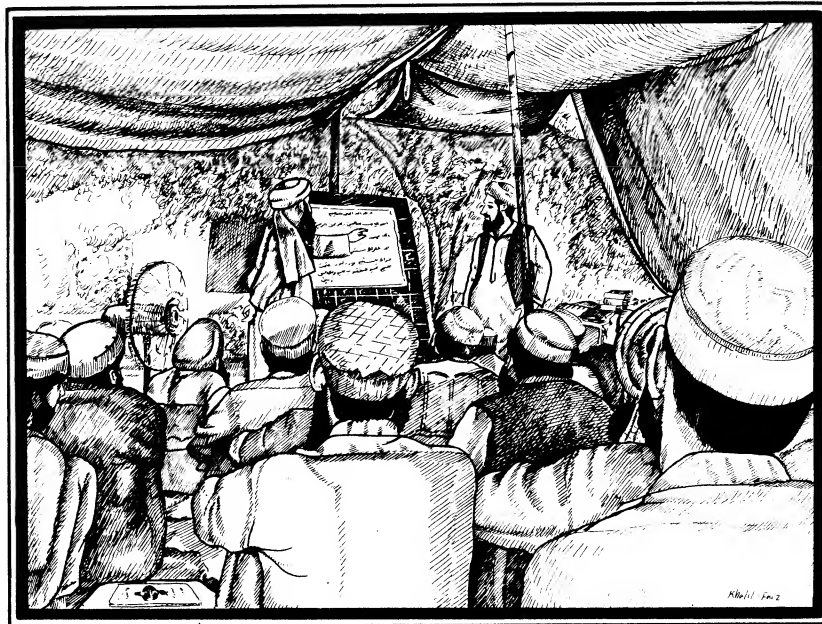
- Training and monitoring the performance of primary school teachers.
- Upgrading the managerial skills of school administrators.
- Providing material and financial support to primary classes and schools.
- Designing and producing teacher guides and other instructional materials.

There has been a steady increase in demand for the educational services provided by IRC's education programs over the years, due in great measure most recently to the closure and consolidation of many of the UNHCR-supported Afghan Commissionerate schools in late 1994 and early 1995.

Student enrollment in schools supported by the Hangu Community Education Program increased from over 16,000 during the 1993/94 academic year to 21,703 in 1994/95, and distribution of books and educational materials and supplies increased from 42 schools in 1993/94 to 74 schools in 1994/95. The Hangu Education Program also established 12 new primary and one secondary school in the Hangu-Thal area refugee camps which enrolled a total of just under 7,000 students.

Teacher Training for Primary School Teachers

The training of teachers and teacher trainers remains one of the highest priorities in all IRC education programs. Trainees learn how to employ improved pedagogical techniques, such as question-and-answer, role play, group work, competition and field work exercises - all of which actively involve students in the learning process and which have been proven to increase the pace of learning. Teachers learn to prepare student-centered lesson plans, to formulate objectives and design and utilize visual aids, applying child psychology theories to classroom management as well.



Summer heat cannot deter master teacher trainers

The number of teachers trained by the Hangu Community Education Program in Pakistan has grown from 34 in the program's inaugural year to a cumulative total of over 2,650 by the close of 1995. Between 1991, when the Program began working to improve educational opportunities in rural communities in Afghanistan, and the end of 1995, it had also trained over 1,750 Afghanistan-based teachers, school administrators and headmasters, who have also been monitored by IRC trainers over the course of the years.

Starting in 1992, IRC's teacher trainers began conducting seminars to improve teacher skills in mathematics and Dari/Pushto. The majority of the teachers attending these seminars had already received training in student-centered teaching techniques.

School Administrators Training

In March 1993, the Hangu Education Program launched its first school administrators' training seminar. Although the teachers were progressing by leaps and bounds in their effective use of the new teaching techniques, both they and the students had been handicapped by the absence of consistent leadership in the coordination of school business, establishment of proper discipline and organization, and the provision of an overall atmosphere conducive to learning. The aim of the seminar was therefore to improve the administrative skills of headmasters, and topics covered included such areas as discipline, organization and record-keeping, coordination of school business and activities, delegation of responsibilities, and creating a teamwork environment.

Increased Community Contribution to Refugee Schools and Classes

Sustainability of the educational services became a central issue in 1995. By the end of 1994, the Hangu refugee communities were already paying rent for some of the schools. Following sustained community mobilization by program staff, in January 1995 all male students in the community-based schools and classes, with the exception of orphans and those too poor to pay, began paying a modest monthly fee of Rs. 5. To encourage refugee parents to send their daughters to school, the female students were charged only a token fee of Rs. 1 per month. These fees were doubled at the beginning of September, the start of the 1995/96 school year, where 25 percent of teachers' salaries were covered by the communities through the student fees collected. IRC also handed over responsibility for the salaries of the school guards to the refugee community. While it is evident that these token charges will not offset the real cost of the educational services provided by the Program, the concept of tuition fees reinforces awareness in the refugee communities concerned of the need to pay for services received, a paramount necessity in the context of an economically shattered Afghanistan embarked on a slow and difficult reconstruction process.

Resource Support for Community-based Schools and Primary Classes in Pakistan

The closing of Afghan party-run schools during 1992/93 created a crisis which left thousands of young Afghan boys and girls stranded without educational opportunities in the Hangu-Thal area camps. To remedy this situation, the Hangu Educational Program, with generous assistance from one of its traditional donors, in 1994 opened one primary school in each of the 12 IRC-assisted camps and one secondary school,

as mentioned earlier. All schools regularly receive textbooks, classroom supplies, teacher salaries, tents and tarpaulins, and are closely monitored, staff performance is supervised and feedback given to teachers to upgrade their teaching proficiency.

During the course of the year, enrollment in the IRC community schools dropped as a result both of the introduction of fees and the reopening of alternative schools nearby where no fees are levied. Students accustomed to IRC's student-centered strategy and reasonable pupil : teacher ratios nevertheless gradually began returning to the Hangu Community Education Program schools such that, by the end of 1995, enrollment had gone up to 7,021, not far from what it had been at the close of the previous school year in May. From September to December, when the fees were doubled, the same schools enrolled an average of 6,228 pupils, of which 80 percent paid fees, a tribute both to the continuous social mobilization efforts by the Program and to the refugee communities' acceptance of the community participation policy.

The Program also supports one other community school and 30 community-based primary classes (grades 1 to 3) for refugee boys and girls, providing books, materials, tents, tarpaulins, and teacher stipends. Teachers are nominated by the community and then screened, trained, and supervised by program staff. The primary-classes program, which teaches reading, writing and simple arithmetic in the students' native language, has shown three exceptional merits through the years:

- 1) Students become literate within a year.
- 2) Because classes are composed of relatives and tribal members from one village or area, girls are able to attend. At the end of 1995, girls comprised 52 percent of the total enrollment in the primary classes.
- 3) While other schools encompass teacher and student populations from varying geographic areas of Afghanistan, the teachers for these classes will, upon repatriation, be returning to the same villages in Afghanistan as their students, and will thus be able to continue teaching in their own community.

During 1995, an average of 1310 students were enrolled in the Afghan community-based primary classes and the Naryab community school. With the closure of two primary schools in Katakani and Lakhti Banda camps in late 1995, the Program at the request of these camp communities opened two more primary classes for students in grades one to three.

Community Education Support in Afghanistan

From one management base, both of the male education programs continued their vital assistance during 1995 to the Afghan students and teachers in the five provinces of south-eastern Afghanistan.

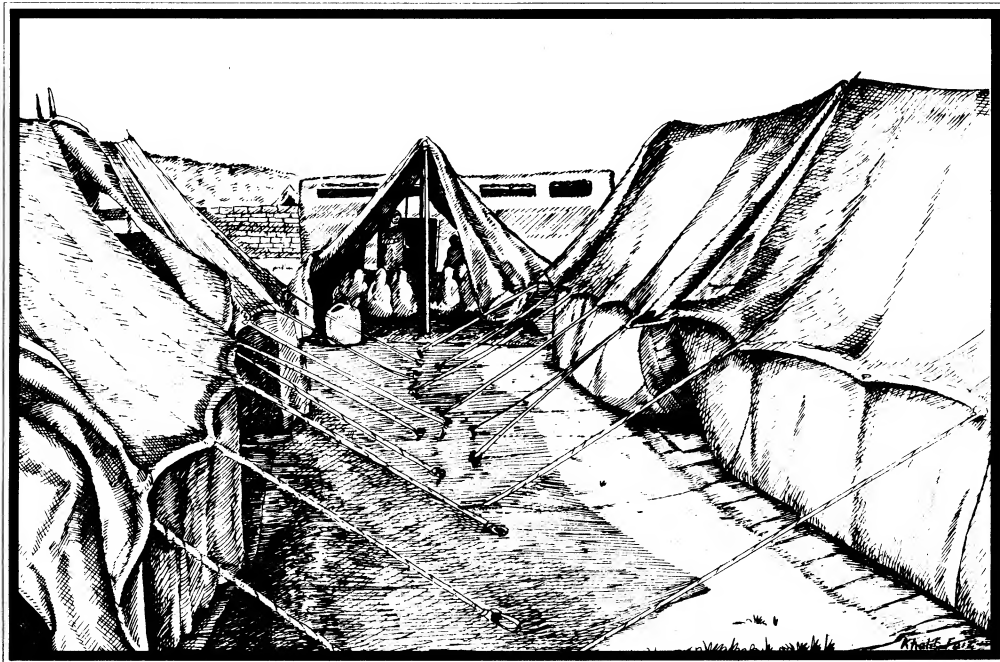
• *Support for Community-based Schools*

The Hangu Education Program provides educational support in the form of textbooks and school supplies to community-based schools in Afghanistan which request assistance. To ensure efficient and fair distribution of supplies, the Program relies on the cooperation of school headmasters and on its own ongoing monitoring activities. Every school which receives support is visited by the Program staff.

This support offered by IRC not only furnishes materials and supplies to outfit classrooms and needy students, but also has a striking effect in improving the self-esteem and community stature of teachers. A marked increase in requests for teacher training has been one compelling result.

- ***Jalalabad Education Program***

RPA added a Jalalabad emergency component to its education program in 1995. Its beneficiaries were the children who had escaped the fighting in Kabul and flooded the Jalalabad camps that had been established in 1994 to house large populations of internally displaced people. IRC's first action was to assume, at UNICEF's request, responsibility for the three UNICEF primary schools already existing in New Hadda Camp. IRC staff, working closely with local education authorities, camp representatives, provincial authorities and UNOCHA, established 16 additional primary and secondary schools. In April, supplies and materials were delivered from the Hangu Education Program and tents were obtained from UNOCHA to house the new schools. A total of 9,732 boys and girls were registered for classes at the 19 schools. With the relative peace in Kabul that occurred in the fall months, many displaced families returned to that city. School enrollment in the Jalalabad camp subsequently stabilized at around 3,500, before fighting broke out again in Kabul and the Jalalabad-Kabul route was completely closed off.



*Tent schools are an effective means of providing education
for the displaced population living in Jalalabad*

A total of 4 pedagogical seminars were held for 119 volunteer camp teachers, who were subsequently monitored by IRC trainers during the course of the year. Seminars for the camp school administrators and headmasters are scheduled to take place in early 1996.



SCIENCE AND TECHNOLOGY TRAINING PROGRAM

Research has indicated that an educated labor force is a necessary pre-condition for economic development to occur. Through support to secondary school education in mathematics and the sciences, IRC thus seeks to provide Afghans with the skills they will need to respond to the enormous and diverse demands which face post-war Afghanistan. After fourteen years of war, one of the greatest obstacles Afghanistan faces is its staggering rate of illiteracy. IRC's Science and Technology Training Program (STT), established in 1985, strives therefore to nurture the educational base for reconstruction efforts in Afghanistan. Until March 30, 1995, two components constituted the STT Program: A) The Experimental School of the Sciences, and B) The Teacher Training and Textbook Program (TTT).

Experimental School of the Sciences

The Experimental School of the Sciences has, since 1986, been providing first-rate comprehensive secondary education, with a concentration on mathematics and sciences, to Afghan refugee boys enrolled in grades seven through twelve. The curriculum, which included courses in biology, geology, chemistry, physics, mathematics, geometry and trigonometry, was designed to prepare and inspire students to pursue university-level studies in engineering, agriculture, medicine and research. The school also offered extra-curricular courses in typing and computer programs.

Throughout 1994, the Experimental School had operated under tight budgetary constraints as a result of broad funding cuts for Afghan refugee programs in Pakistan. With the termination of donor funding on March 31, 1995, IRC was regretfully obliged to cease its support to the Experimental School component of the Program.

One of IRC's primary aims throughout all of its programs for Afghans has been to reduce dependency, nurture self-sufficiency and achieve sustainability. The Experimental School offered high-quality instruction, coupled with extensive laboratory equipment, limited class sizes and a comprehensive resource library, all of which combined to set the Experimental School apart from other similar refugee schools. Unwilling to lose such a valuable institution, the academic staff of the Experimental School took the initiative of establishing a successor school, which they finance by charging a monthly tuition fee. To date, the new school has enrolled

348 students in eight classes. Arguably the best high school for Afghan refugee youth in Pakistan, in its new guise as a private institution run by the same Afghan academics, the Experimental School has left behind a promising and continuing legacy for the whole Afghan community in Peshawar.

Teacher Training and Textbook Program

- ***Teacher training***

In the past ten years since the program began, TTT has focussed on improving the quality of secondary education for Afghans through teacher training and the development and distribution of textbooks and educational materials. TTT staff have developed three levels of mathematics and science in-service training seminars for Afghan middle and secondary school teachers representing three levels of proficiency. These one-month seminars aim to improve the teachers' subject-matter knowledge in biology, chemistry, physics, mathematics and geometry, as well as their pedagogical techniques. Seminar emphasis is on the effective use of student-centered teaching techniques and on improved textbooks, teacher guides and instructional aids.

TTT's program trainers have conducted 40 seminar sessions for 1,762 teachers during its decade of operation. Since 1993, the program has increasingly shifted its training focus from Pakistan to Afghanistan and has, to date, trained 560 Afghanistan teachers in 10 seminar sessions. Following completion of the seminars, the seminar participants are monitored and provided on-the-spot guidance and assistance by STT staff.

- ***Textbook and Material Support***

To increase access to up-to-date, high-quality Dari- and Pushto-language textbooks, the program trainers have authored biology, geology, chemistry, mathematics, geometry, physics and trigonometry textbooks as well as laboratory manuals and teachers' guides. All are in line with the national education curriculum, and all are officially recognized by the Afghan Ministry of Education.

In the ten years since the Program's inception, middle and secondary school headmasters, principals and even individual students regularly approach the STT program staff requesting assistance in textbook supply. During 1995, a sum total of 121,671 textbooks and laboratory manuals were distributed to schools and TTT seminar graduates in Pakistan and Afghanistan. In 1995, the Ministry of Education (MOE) in Kabul also requested and received STT textbooks for distribution to the MOE-operated teacher training institutes.



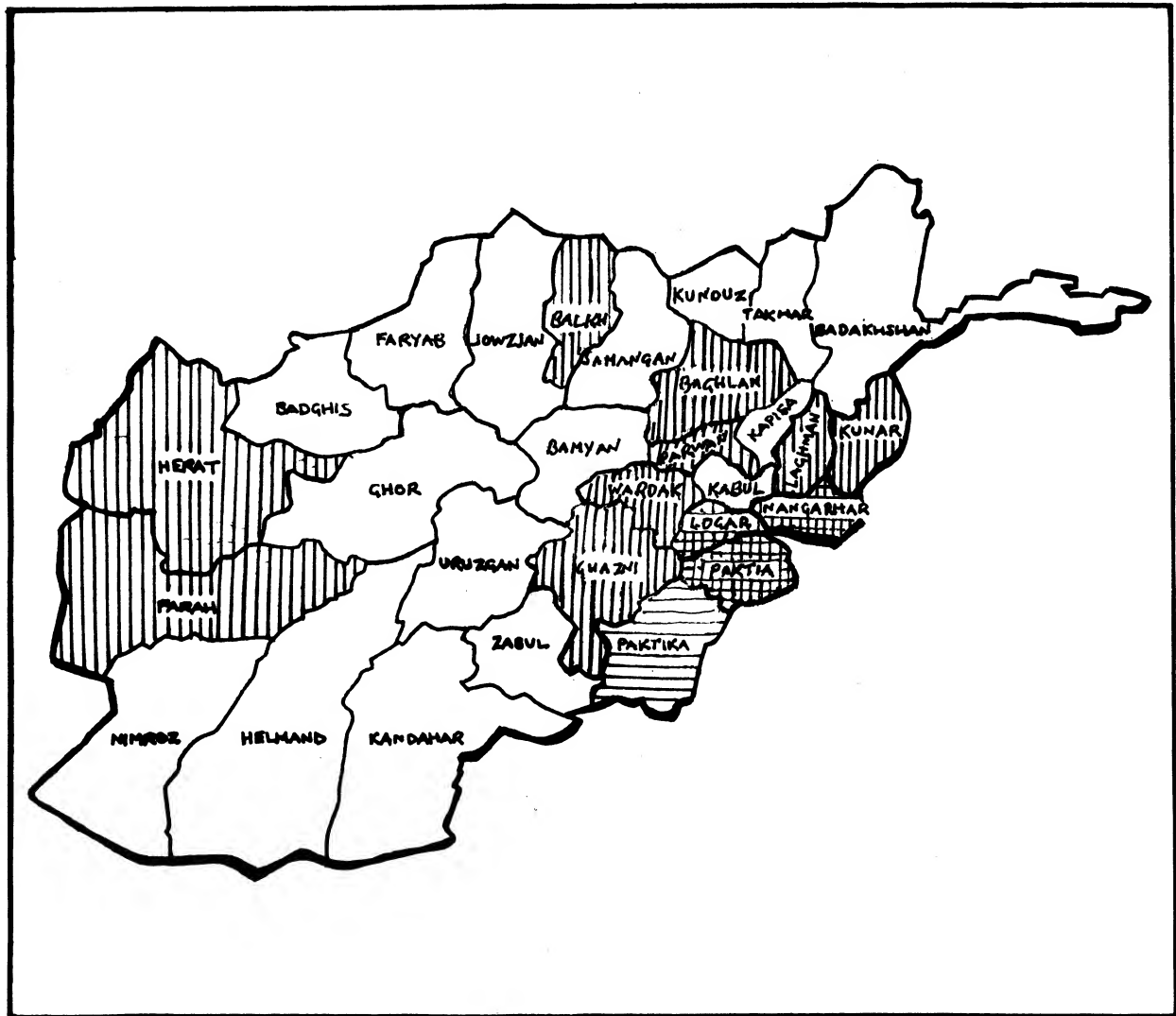
AFGHANISTAN

RECONSTRUCTION AND REHABILITATION

- ❖ **REHABILITATION PROGRAM FOR
AFGHANISTAN**
- ❖ **RURAL ASSISTANCE PROGRAM**

IRC Program for Afghans

Project Area Map - Afghanistan



PROVINCES SERVED BY R.P.A.



PROVINCES SERVED BY R.A.P.



PROVINCES SERVED BY R.P.A. AND R.A.P.

REHABILITATION PROGRAM FOR AFGHANISTAN

The Rehabilitation Program for Afghanistan was established in 1988 to promote the repatriation of Afghan refugees following the signing of the Geneva Accords. The flood of Afghan refugee repatriation, which occurred in the spring of 1992 after the fall of the Soviet-backed communist government in Kabul, diminished to a trickle, however, with the outbreak of internecine fighting during the summer of that year. With the intensification of hostilities in early 1994, especially in and around Kabul, not only has voluntary repatriation all but virtually come to a standstill, but a new exodus from the beleaguered city has intervened to swell the numbers of refugees and internally displaced persons from Afghanistan.

Despite these impediments to peace and normality, IRC's Rehabilitation Program for Afghanistan (RPA) has since its inception continued to help refugee communities to develop viable agricultural enterprises, improve health conditions, and support newly established schools in rural Afghanistan. RPA's assistance has evolved from short-term, emergency relief to more sustainable strategies which encourage community involvement in a coordinated package to facilitate the return of refugees. RPA focuses its activities in the south-eastern Afghanistan provinces of Khost, Paktia, Paktika, Logar and Nangarhar, provinces to which most of the refugees in the camps that IRC supports in Pakistan can be expected to return.



*Agriculture has long been a mainstay of the Afghan economy.
RPA's support is helping to revitalise this important sector*

Agriculture and Agricultural Infrastructure Program

The objective of this program is to revitalize the rural economy in target repatriation areas by developing agriculture in key sectors which increase food production and farm income. Assistance to farmers is provided through Agricultural Rehabilitation Centers (ARCs), which serve as models of advanced agronomic practices in highly visible locations and provide improved farm inputs to local farmers. The primary sectors chosen for these activities involve improved seed multiplication, orchard management, poultry raising, vegetable gardening, fruit storage and preservation, agro-forestry and beekeeping.

RPA uses a "key" farmer approach to disseminate modern farming techniques. Progressive farmers in each area who have demonstrated superior farming skills, receptivity to training and the ability to pass on ideas and techniques to others receive in-depth training and material inputs as well as continuing extension support for specific agricultural activities. The key-farmer approach was selected to emulate the traditional Afghan method of exchanging agricultural information and resources.

- *RPA extensionists provided intensive training to 2,759 key and non-key farmers in 12 technical fields.*
- *102.6 metric tons of improved wheat seed were provided to farmers by the Seed Production and Processing Unit for seed multiplication purposes.*
- *45 key and non-key farmer woodlots were established and planted with cuttings of different species.*
- *92,964 cuttings and seedlings of different species were distributed to 595 farmers in the general distribution program.*
- *203 key farmers received almost 17,000 fruit trees covering orchards of over 40 hectares.*
- *The 40 private nurseries established in 1995 produced over 125,000 fruit trees.*
- *210 key farmers received 159.4 kg of seed of different types of vegetables.*
- *35,550 vegetable seedlings were distributed to 162 key farmers.*
- *20 pest management demonstration plots were established.*

The program also assists communities in rehabilitating their irrigation systems and cleaning and reconstructing *karezes* (traditional underground water channels) and canals, which years of neglect or war damage have degraded. The communities themselves make a contribution to these activities by providing 40 percent of the cost of the work in the form of labor and local materials.

Half-way through 1995, RPA initiated the first phase of its 1996 privatization strategy. Approximately 180 farmers were carefully selected to set up small-scale enterprises in sectors of high market demand. To ensure the sustainability of these production units, the farmers all received training in small-business management by the end of 1995. This program, funded through the support of the Dutch Government, will continue in 1996. Activities selected for privatization are: gur (sugar) making plants, private nurseries, poultry hatcheries, chickenfeed mills, improved seed multiplication and fishponds.

- *By the end of 1995, over 71,000 fertilized eggs were produced for consumption, breeding and sale.*
- *346 bee colonies were distributed to 62 key farmers. These key farmers propagated 42 new colonies, producing 2,700 kg of honey.*
- *115 bee farms established in 1993 and 1994 produced almost 12,000 kg of honey.*
- *By the end of 1995, six fishponds were established with key farmers, for a total volume of 4,867 cubic meters.*
- *Eight fishponds established in 1993 and 1994 harvested over 670 kg of fish.*

Plans were also begun this year to establish the RPA engineering department as an independent NGO, with potential donors being approached with proposals. Interest among the various U.N. bodies has been very keen.



The RPA Nari Shahi canal rehabilitation project helped to re-irrigate over 10,000 jeribs of arable land

Public Health Program

Aware that many refugees will return to areas of Afghanistan which have limited or no medical facilities, IRC has consistently emphasized preventive health care messages in the refugee camps of Pakistan. The RPA Public Health Program in Afghanistan aims to build upon the health knowledge acquired by refugees during their time in the camps, and to implement preventive health care programs in Afghanistan which will reduce the spread of communicable diseases.

The three components of RPA's Public Health Program - clean water, sanitation and immunization - are linked through the health education activities carried out by its trained sanitarians, and are designed to stimulate communities to make the connection between behavior and health. Simple information and practical advice is conveyed, for example, about the transmission and prevention of water-borne and vector-borne diseases; environmental, household and human waste disposal; personal and household hygiene; the relationship between a sanitary environment, clean water and health; and construction and maintenance of latrines and clean water supply systems.

- ***Water and Sanitation***

RPA's public health program in Paktia, Paktika and Logar provinces this year continued its strategy of integrating its water supply, latrine construction and health education components in order to maximize health benefits to communities. Where possible, RPA's water supply engineers and sanitarians worked as teams in a coordinated assistance package: While engineers supervised installation of gravity-flow water systems, sanitarians promoted latrine construction and supervised environmental waste disposal. Despite severe difficulties in obtaining permits from the Pakistan government to transport sanitation and water supply materials into Afghanistan, RPA was nevertheless finally able to deliver the quantities of cement, fitting materials and PVC pipe needed to complete implementation of 25 water supply projects, with one still ongoing.

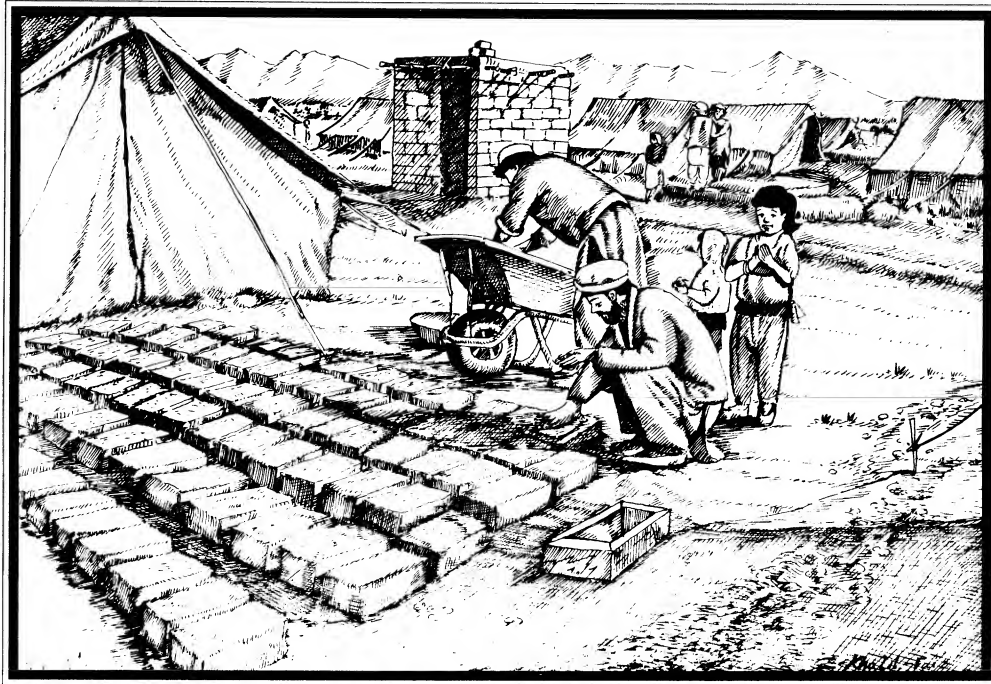
At the same time, in the rural areas of Paktia and Logar, where Afghan refugees are returning, RPA assisted communities in the construction of ventilated improved pit latrines or surface latrines for human waste disposal. Local masons were contracted to construct the slabs required for the latrines, while individual families were responsible for construction of the latrine chambers and had to contribute their own labor to build mud-brick or stone walls and roofs under the supervision of RPA sanitarians. By the end of November 1995, the sanitation program had constructed a total of 151 latrines and provided community health education to all the planned beneficiary populations.

In January 1994, the Public Health program was confronted with a situation in Jalalabad of potentially crisis proportions. Heavy fighting among Afghan factions occasioned a mass exodus of people from Kabul to the relative safety of Jalalabad. During the first two weeks of January alone an estimated 60,000 people arrived in Jalalabad, often with nothing more than the clothing on their backs. By February 1995, UNHCR reported over 200,000 internally displaced Afghans - the vast majority of them from Kabul - registered in the Jalalabad camps.

This extraordinary influx of people put a tremendous strain on public health services in and around the Jalalabad area. From an estimated population of 65,000 prior to the renewed fighting, it suddenly had to cater to the basic needs of nearly half a million people, half of them suffering severe privation. Of paramount concern was the chronic water shortage in the camps and the severely inadequate sanitation conditions, both of which posed a serious threat to public health. To ameliorate conditions for the displaced persons in the camps, RPA initiated an emergency

program for Jalalabad in January 1995, concentrating on the immediate needs of the camp dwellers. From January to May, IRC sanitarians assisted residents of two blocks of Jalalabad's New Hadda Camp in the construction of a total of 952 family latrines following the design approved by UNICEF. By June, attention was turned to IRC's tent schools in the camps; 187 latrines were completed in July 1995 with all latrine superstructure work undertaken by the communities on a voluntary basis.

A cessation of funding for the RPA sanitation program called a halt to its activities, and the water-supply component was handed over to RPA's engineering department.



*Sanitation is an important part of RPA's Jalalabad Emergency Program.
Here bricks are prepared for use in latrine construction*

- *Expanded Program for Immunization (EPI)*

Afghanistan's high child mortality rate for children under five years of age is attributed to the prevalence of infectious and communicable diseases such as diarrhea, measles and malaria. Such diseases are preventable both through sanitation and through childhood and maternal immunization. The vaccines routinely administered provide immunization against tetanus, tuberculosis, diphtheria, pertussis, poliomyelitis and measles. Females of child-bearing age are vaccinated against tetanus to protect their infants from neo-natal tetanus.

From its mobile immunization program operating cross-border from its base in Darsamand, Pakistan, RPA in 1995 was able to shift to the establishment of fixed district and sub-district level EPI centers, from which outreach activities could be regularly scheduled to less accessible populations. By the end of December 1995, RPA had established a total of 12 fixed EPI facilities in existing health centers, and

had participated in rounds 2 and 3 of the spring and summer mass immunization campaigns as well as in the winter catch-up campaign.

- *The EPI program vaccinated a total of 25,230 children under two years of age and fully immunized 54,827 females aged 5 to 45.*

At the beginning of 1995, negotiations were underway between IRC, UNICEF, and other EPI implementing partners to transfer EPI responsibility to agencies operating health facilities in various provinces of Afghanistan. In early August, target provinces were reallocated by UNICEF amongst the various EPI implementers in Afghanistan, and RPA was assigned 26 districts of Paktia province for its 1995 annual EPI program, which were to be handed over by the end of 1995 to the Swedish Committee for Afghanistan (SCA). Since SCA was unable to take over the twelve fixed EPI centers which IRC had established in pursuance of the UNICEF plan, the hand-over was extended until the end of March 1996.



RURAL ASSISTANCE PROGRAM

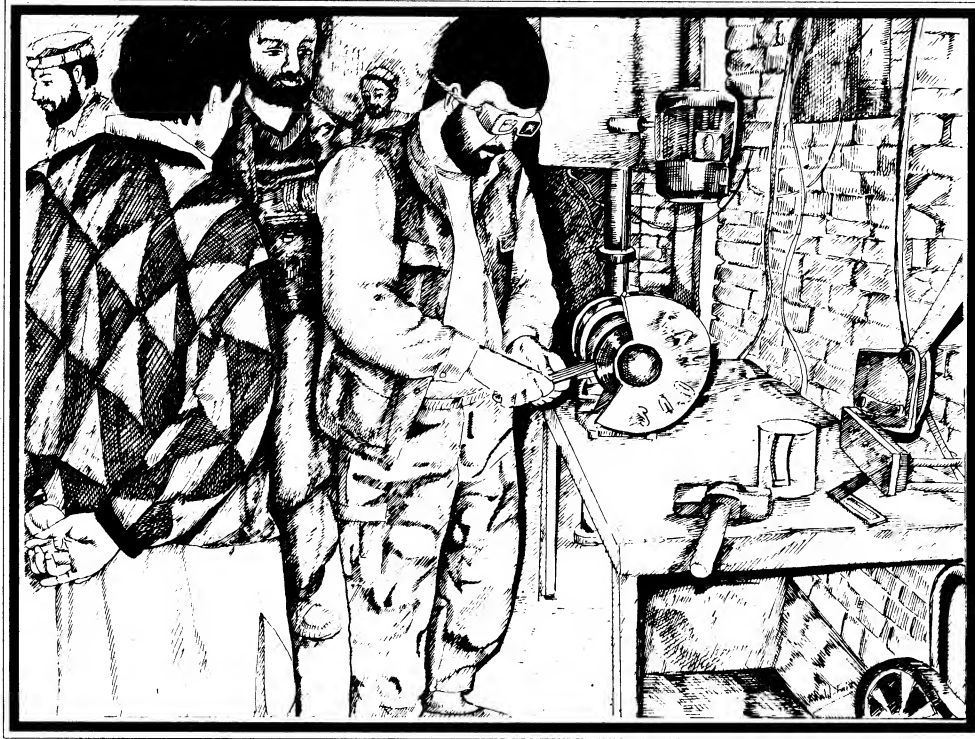
Established in July 1988 with funding from the United States Agency for International Development (USAID), the Rural Assistance Program (RAP) began to support emergency and survival assistance initiatives, primarily in the form of food aid, in war-stricken areas of Afghanistan. Beginning in 1991, however, RAP extended its mandate to include support for the implementation of rural rehabilitation projects in the public health, agriculture and civil engineering sectors through the institutional development of Afghan NGO implementing partners.

When USAID ended its assistance to Afghanistan in 1994, the European Community and the Dutch refugee-assistance organization, Stichting Vluchteling (SV), assumed the donor mantle for IRC RAP's rehabilitation efforts, which were then increasingly turned toward vocational training.

- *21 grants were awarded to 17 different NGOs in 12 different provinces of Afghanistan. 11 of the projects were in the vocational training sector, with over 1,000 students trained, approximately one-quarter of whom were women.*
- *5 grants were awarded for the rehabilitation of Afghanistan's infrastructure, helping to re-irrigate and protect approximately 11,600 jeribs of agricultural land.*

A number of significant political changes occurred in Afghanistan during the course of 1995 which affected ongoing RAP projects to varying degrees. The ascendancy of the Taliban and their capture of Herat, along with their intermittent blockade of

Kabul, have affected the education and training of women and led to logistical problems and severe impediments to project activities within Kabul in particular. Despite the vicissitudes facing certain project activities in Afghanistan during 1995, RAP awarded grants to 17 different NGOs in 12 different provinces of Afghanistan. Eleven of the projects were in the vocational training sector, and offered training to over 1,000 students in carpentry, welding, masonry, tailoring and leatherwork.



A former Mujahedin learns a new trade through a RAP vocational training grant

Three grants were devoted to two agencies working in the formal education sector, which provided schooling for a total of 962 students, half of whom again were girls. Five grants were awarded for the rehabilitation of infrastructure in Afghanistan: one for constructing latrines for camp residents of Jalalabad, and the remaining four concentrating on the rehabilitation of irrigation systems damaged by war or neglect.

These latter projects have brought approximately 1,000 jeribs of agricultural land back into irrigation. Two grants were awarded in the area of technology transfer -- for an improved bakery oven and a vertical shaft brick kiln.

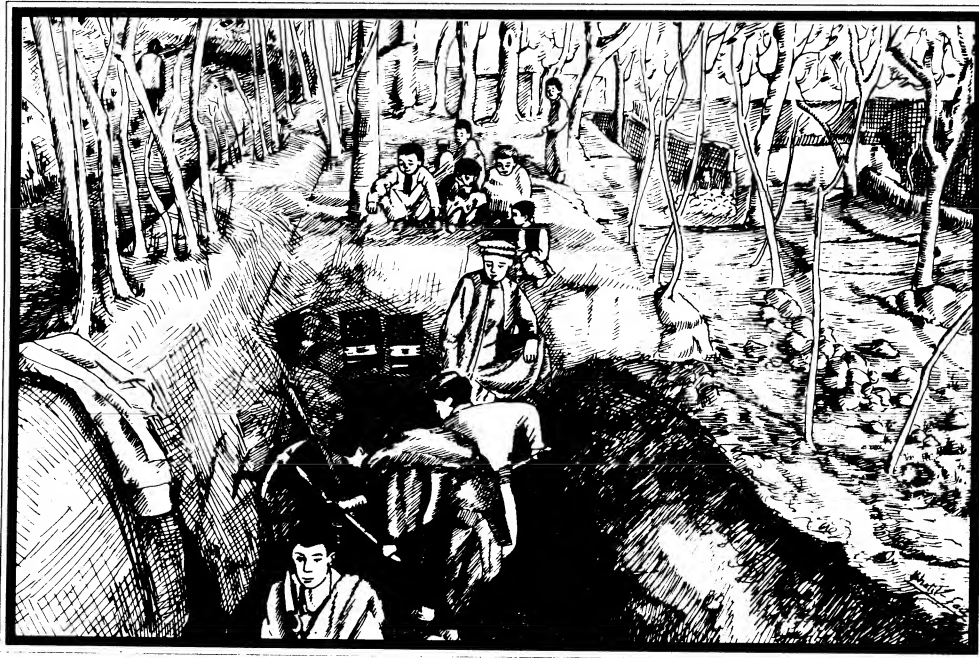
- ***Grant Oversight and NGO Support***

RAP has increasingly sought to foster the sustainability of the projects it funds. While Afghan NGOs once comprised only a portion of the program's grantee portfolio, today virtually all of RAP's implementing partners are Afghan-managed organizations. Through its support for Afghan NGOs, RAP promotes the development of indigenous institutions capable of establishing long-term working relationships with rural communities in Afghanistan.

- ***Proposal Review and Development***

In the course of a year, RAP reviews about 450 concept papers from NGOs seeking project funding. The aim of the review process is to identify feasible projects, and then collaborate with the NGO concerned in development of the concept into a proposal which satisfies the criteria laid down by RAP's donors. The RAP staff meets frequently with the potential grantee's directors, accountants and project staff to map out well-conceived project strategies, viable and appropriate work plans and coherent and compelling project proposals for submission to donors.

The most important considerations among the criteria required for a concept to be selected for funding are the NGO's implementing capacity, the sector in which the NGO proposes action, the geographical location of the project, and the amount of funds available. In most instances, the site of a proposed project is first inspected by RAP monitors. Only when a concept has proven to be needed, viable and feasible is it turned into a proposal and submitted by RAP to a donor.



Community participation is a requirement of all RAP grants and members of the community, both young and old, can often be seen informally monitoring the progress of a project

- ***Training and Educational Services Unit (TESU)***

As RAP's relationships have evolved with implementing Afghan NGOs, the NGOs' strong needs in the area of institutional development have become increasingly clear. The sole function of RAP's Training and Educational Services Unit (TESU), created in 1991, is to build the institutional capacities of the NGOs RAP supports. The TESU offers training courses to Afghan NGOs in all the skills necessary to plan, coordinate and implement their project activities. To achieve this goal, TESU designs and conducts courses in administration and management, field accounting, data collection, report writing, record keeping, community participation and training

methodology, supplementing this service with follow-up visits to monitor the NGOs' post-training job performances.

• *During 1995, sixteen different project management courses were conducted for 38 Afghan and 21 international NGOs. 1,500 days of training were provided for 233 individuals.*

As a new 1995 initiative mandated by the European Union, TESU provides an additional service to NGOs receiving support: Upon request, trainers will prepare curricula specifically tailored to an NGO staff's training needs. A three-week seminar was held in Kabul City for 45 Afghan field staff on topics such as administration/management and report writing. Two report-writing workshops were conducted in Jalalabad and Kabul for 34 project staff of 14 different NGOs; three human resource management workshops were given in Peshawar to 27 NGO staff members, and 9 of IRC's own supervisory staff members were trained in Peshawar at the end of the year. Since January 1994, the RAP TESU has provided over 3,407 days of training to Afghan and international NGO staff members.

Monitoring and Financial Auditing

Monitoring and financial auditing are an increasingly crucial part of the RAP project cycle for both the donor and the implementing partner. A system of field audits, instituted in 1994 to overcome the difficulties of obtaining reliable financial information from the field, includes a training/advisory component designed to increase the accountability of implementing partners and strengthen their accounting procedures.

The monitoring department provides project information essential to other departments within RAP, particularly the reports section. This information facilitates assessments of the success of projects being implemented, and permits determination of whether or not to renew grants to NGO partners. It also points up problems facing NGOs working in the field and enables RAP to offer help in solving those problems.

RAP's auditing department provides financial monitoring of NGO partners. NGOs submit monthly financial reports based on expenditures incurred, while auditing visits are paid periodically to NGO head offices to verify expenditures reported. These visits also afford RAP an opportunity to assist NGOs in overcoming weaknesses in accounting. Frequent visits have enabled RAP to strengthen the financial management of many Afghan NGOs.



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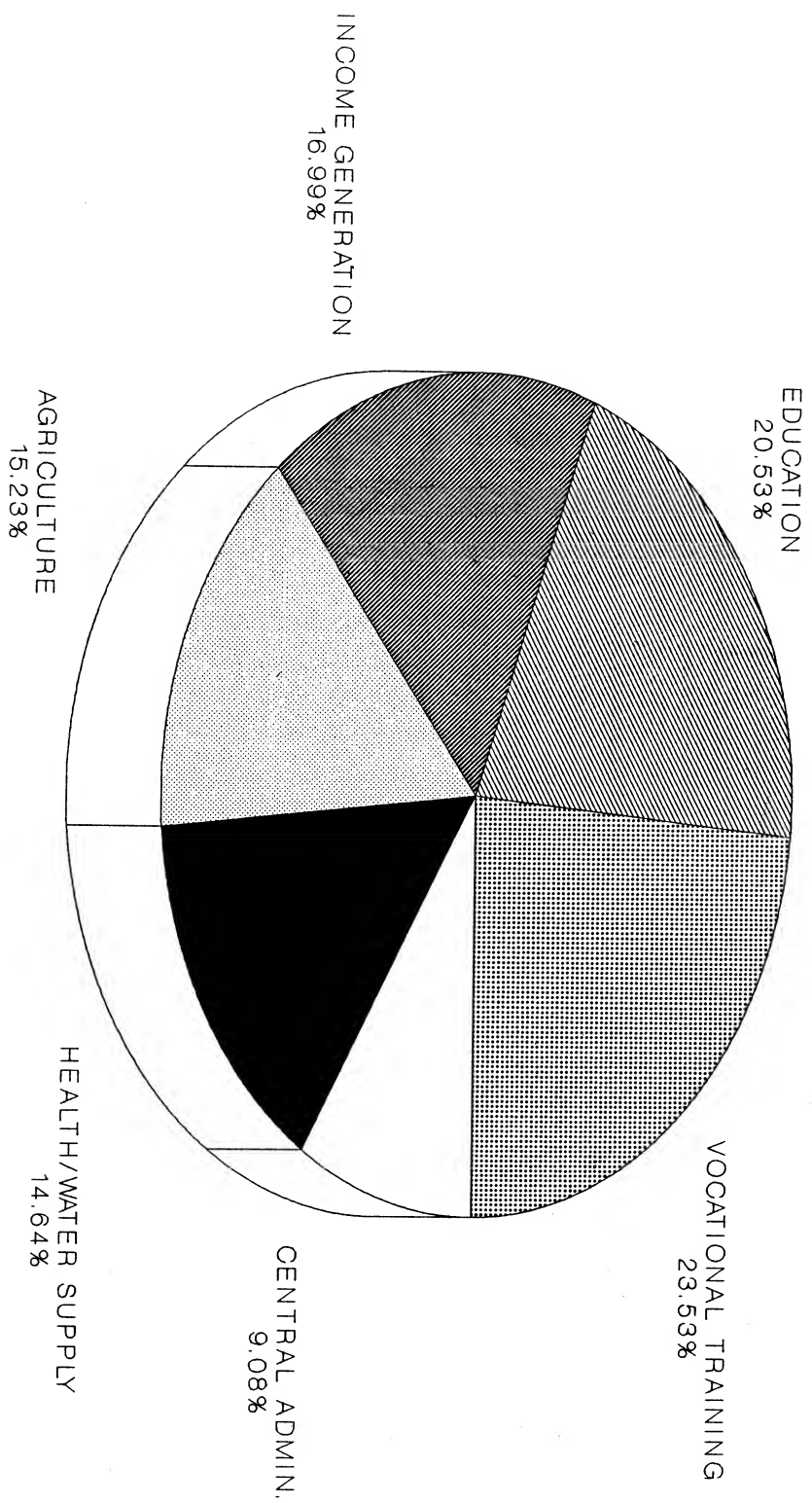
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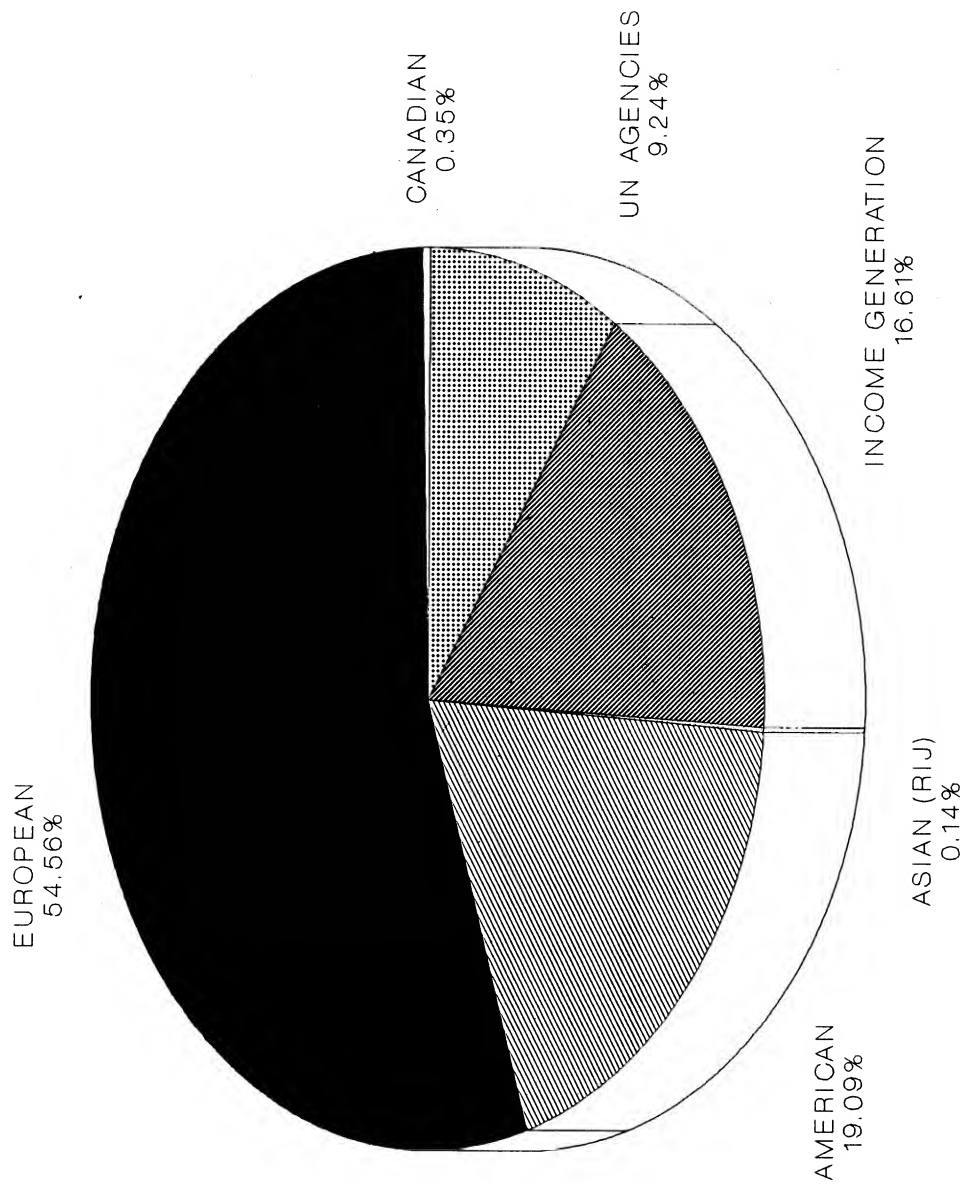
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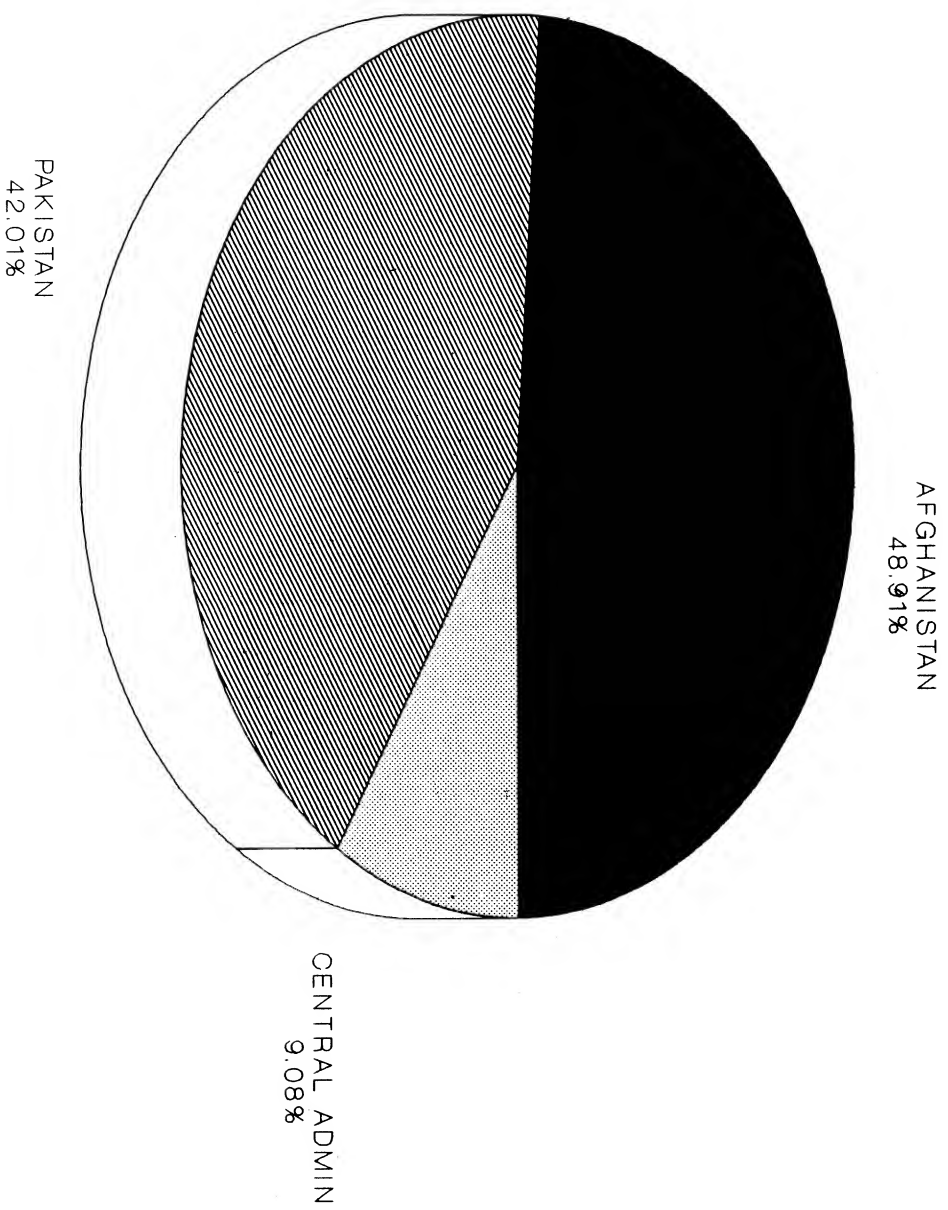
EXPENSES BY SECTOR



EXPENSES BY DONOR

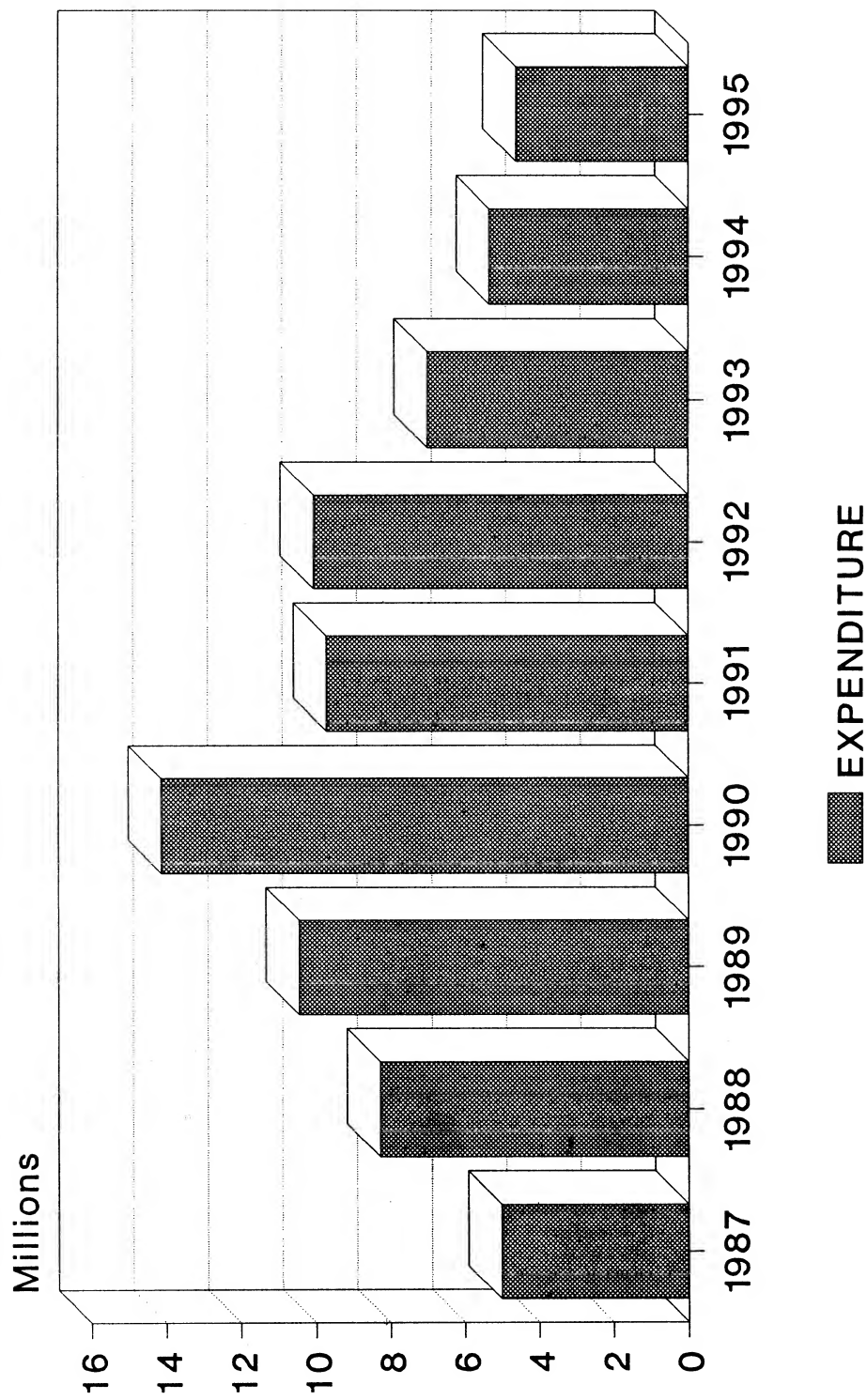


EXPENSES BY AREA



YEARLY EXPENDITURE

1987 - 1995



ACKNOWLEDGEMENTS

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Text

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Layout

Jon Barden

Illustrations

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Printing

IRC Printing Press

